

LEGISLATIVE TRACKING FORM

Filing for Council Meeting Date: 06/16/26



Resolution



Ordinance

Contact/Prepared By: Brad Thompson

Date Prepared: 05/11/26

Title (Caption): VUMC Ryan White subgrant for the provision of Medical Case Management, Mental Health Services and Outpatient Ambulatory

for participants in the Ryan White Part A program.

RS2026-1871

3/26- 2/27

38351137

Submitted to Planning Commission? ☐ N/A ☐ Yes-Date: _____ Proposal No: _____

Proposing Department: Health Requested By: Health

Affected Department(s): Health Affected Council District(s): all

Legislative Category (check one):

- | | | |
|---|---|--|
| ☐ Bonds | ☒ Contract Approval | ☐ Intergovernmental Agreement |
| ☐ Budget - Pay Plan | ☐ Donation | ☐ Lease |
| ☐ Budget - 4% | ☐ Easement Abandonment | ☐ Maps |
| ☐ Capital Improvements | ☐ Easement Accept/Acquisition | ☐ Master List A&E |
| ☐ Capital Outlay Notes | ☐ Grant | ☐ Settlement of Claims/Lawsuits |
| ☐ Code Amendment | ☐ Grant Application | ☐ Street/Highway Improvements |
| ☐ Condemnation | ☐ Improvement Acc. | ☐ Other: _____ |

FINANCE Amount +/-: \$ 765,882.00

Funding Source: Capital Improvement Budget
Capital Outlay Notes
Departmental/Agency Budget
Funds to Metro
General Obligation Bonds
Grant
Increased Revenue Sources

Match: \$ _____

Judgments and Losses
Local Government Investment Project
Revenue Bonds
Self-Insured Liability
Solid Waste Reserve
Unappropriated Fund Balance
4% Fund
Other: _____

Approved by OMB: _____

Approved by Finance/Accounts: _____

Approved by Div Grants Coordination: _____

Date to Finance Director's Office: _____

APPROVED BY

FINANCE DIRECTOR'S OFFICE: _____

ADMINISTRATION

Council District Member Sponsors: _____

Council Committee Chair Sponsors: _____

Approved by Administration: _____ Date: _____

DEPARTMENT OF LAW

Date to Dept. of Law: _____ Approved by Department of Law: _____

Settlement Resolution/Memorandum Approved by: _____

Date to Council: _____ For Council Meeting: _____ ☐ E-mailed Clerk

☐ All Dept. Signatures ☐ Copies ☐ Backing ☐ Legislative Summary ☐ Settlement Memo ☐ Clerk Letter ☐ Ready to File

Department of Law - White Copy

Administration -Yellow Copy

Finance Department -Pink Copy

RESOLUTION NO. _____

A resolution appropriating a total of \$765,882 from the Metropolitan Government, acting by and through the Metropolitan Board of Health, to Vanderbilt University Medical Center and approving a grant contract by and between the Metropolitan Government, acting by and through the Metropolitan Board of Health, and Vanderbilt University Medical Center, for the provision of medical case management, mental health services, and outpatient ambulatory care for participants in the Ryan White Part A program.

WHEREAS, Section 7-3-314 of the Tennessee Code Annotated states that metropolitan forms of government may provide financial assistance to nonprofit organizations in accordance with the guidelines of the Metropolitan Government; and,

WHEREAS, Section 5.04.070 of the Metropolitan Code of Laws provides that the Council may, by Resolution, appropriate funds for the financial aid of nonprofit organizations; and,

WHEREAS, Metropolitan Charter Section 10.104 provides that the Board of Health has the duty to contract for such services as will further the program and policies of the Board, subject to confirmation by Resolution of Council; and,

WHEREAS, Resolution No. RS2026-1871 approved a grant award of \$1,311,652 from the U.S. Department of Health and Human Services to the Metropolitan Board of Health to provide for the prevention, surveillance, diagnosis, and treatment of HIV/AIDS; and,

WHEREAS, Resolution No. RS2026-_____ approved a grant award of \$3,185,496 from the U.S. Department of Health and Human Services to the Metropolitan Board of Health to provide for the prevention, surveillance, diagnosis, and treatment of HIV/AIDS; and,

WHEREAS, the Metropolitan Government of Nashville and Davidson County, acting by and through the Metropolitan Board of Health, wishes to appropriate funding and contract with Vanderbilt University Medical Center to provide medical case management, mental health services, and outpatient ambulatory care for participants in the Ryan White Part A program; and,

WHEREAS, it is to the benefit of the citizens of The Metropolitan Government of Nashville and Davidson County that the funding is appropriated and the contract approved.

NOW, THEREFORE, BE IT RESOLVED BY THE COUNCIL OF THE METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY:

Section 1. There is hereby appropriated Seven Hundred Sixty-Five Thousand Eight Hundred Eighty-Two Dollars (\$765,882) from the Metropolitan Government of Nashville and Davidson County, acting by and through the Metropolitan Board of Health, to Vanderbilt University Medical Center for the purposes herein stated.

Section 2. The Metropolitan Government is hereby authorized to enter into a grant contract, attached hereto and incorporated herein, with Vanderbilt University Medical Center for the amount provided herein and the purposes stated.

Section 3. That this resolution shall take effect from and after its adoption, the welfare of the Metropolitan Government of Nashville and Davidson County requiring it.

APPROVED FOR PROPER BUDGET
PROCEDURES:

Aaron Pratt

Budget Officer

INTRODUCED BY:

APPROVED AS TO AVAILABILITY OF
FUNDS:

Jennaeen Reed/mjw

Director of Finance

Member(s) of Council

APPROVED AS TO FORM AND LEGALITY:

Matthew Garth

Assistant Metropolitan Attorney

**Grant contract between the Metropolitan Government of Nashville and Davidson County and
Vanderbilt University Medical Center Contract # _____**

**GRANT CONTRACT
BETWEEN THE METROPOLITAN GOVERNMENT
OF NASHVILLE AND DAVIDSON COUNTY
AND
VANDERBILT UNIVERSITY MEDICAL CENTER**

This Grant Contract issued and entered into pursuant to Resolution RS2026-_____ by and between the Metropolitan Government of Nashville and Davidson County ("Metro"), and Vanderbilt University Medical Center, ("Recipient"), is for the provision of Ryan White Part A program services, as further defined in the "SCOPE OF PROGRAM" and detailed in this Grant Contract. Attachments A through H are incorporated herein by reference.

A. SCOPE OF PROGRAM:

A.1. The Recipient will use the funds to provide the following Ryan White Part A program services:

a. Medical Case Management

- i. Provide 1152 eligible clients with medical case management services.
- ii. Provide 4224 medical case management service units for eligible clients at 15 minutes per unit.
- iii. Provide 2656 assessment and reassessment service units for eligible clients.

b. Mental Health

- i. Provide 256 behavioral health units for eligible clients at 15 minutes per unit.

c. Outpatient Ambulatory

- i. Provide 23 new uninsured eligible clients with direct outpatient ambulatory care.
- ii. Provide 268 uninsured eligible clients in the transitional grant area with direct outpatient ambulatory care.
- iii. Complete 536 visits to the Vanderbilt Comprehensive Care Clinic for clients in the transitional grant area receiving direct outpatient ambulatory care.
- iv. Complete 2222 encounters between pathway nurse case managers and eligible clients.

A.2. The Recipient shall ensure that eligible program participants are referred, encouraged and assisted in enrolling in other private and public benefits programs, including but not limited to, Housing Opportunities for Persons with AIDS, Section 8 Housing, Supplemental Nutrition Assistance Program, Temporary Assistance for Needy Families, Women Infant & Children and other non-profit service programs.

A.3. The Recipient shall ensure that eligible program participants are referred, encouraged and assisted in enrolling in other private and public health coverage programs, including but not limited to, Medicaid, Medicare, State Children's Health Insurance Programs, and Private Insurance.

A.4. The Recipient shall ensure billing and collection from private and public health coverage programs, including but not limited to, Medicaid, Medicare, State Children's Health Insurance Programs, and Private Insurance, so that the Ryan White Program remains the payer of last resort.

Grant contract between the Metropolitan Government of Nashville and Davidson County and Vanderbilt University Medical Center Contract #_____

- A.5. The Recipient shall utilize Program Income as required by Program Specific Term 29 of the Ryan White Part A Notice of Award for grant #H89HA11433-18 (RS2026-1871) and all applicable modifications and further explained in provision 2 CFR § 200.307.
- A.6. The Recipient shall utilize the CAREWare information system for program reporting purposes and meet the standards and specifications in 45 CFR § 170, subpart B.
- A.7. The Recipient must spend funds consistent with the Grant Spending Plan, attached and incorporated herein as **Attachment A**. The Recipient must collect data to evaluate the effectiveness of their services and must provide those results to Metro according to a mutually acceptable process and schedule, and when needed, upon request.
- A.8. The Recipient must comply with all quarterly reporting requirements. Recipient must submit quarterly reports that contain the following:
- Implementation Plans
 - Provider Data Import Report
 - Other data as requested.
- A.9. The Recipient will only utilize these grant funds for services the Recipient provides to documented residents of Cannon, Cheatham, Davidson, Dickson, Hickman, Macon, Robertson, Rutherford, Smith, Sumner, Trousdale, Williamson and Wilson Counties. Documentation of residency may be established with a recent utility bill; voter's registration card; driver's license or other government issued identification; current record from a school district showing an address; or affidavit by landlord; or affidavit by a nonprofit treatment, shelter, half-way house, or homeless assistance entity located in the named counties.
- A.10. The funds received through this contract are considered federal funds subject to the Single Audit Act, the provisions of 2 CFR § 200 Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards, the Health & Human Services specific provisions at 2 CFR § 300, the Ryan White Part A Notice of Award for grant #H89HA11433-18 (RS2026-1871) and all applicable modifications, the HIV/AIDS Bureau Policy Notices and Program Letters, and the HHS Ryan White Part A Manual.

B. GRANT CONTRACT TERM:

- B.1. **Grant Contract Term.** The term of this Grant will commence on the date filed with the Metropolitan Clerk after receiving all required Metro approvals and ending on February 28, 2027. Metro will have no obligation for services rendered by the Recipient that are not performed within this term, although it is understood that Recipient has provided services prior to the commencement of the term of this agreement and will be allowed to submit invoices and be paid for services rendered beginning March 1, 2026.

C. PAYMENT TERMS AND CONDITIONS:

- C.1. **Maximum Liability.** In no event will Metro's maximum liability under this Grant Contract exceed Seven Hundred Sixty-Five Thousand Eight Hundred Eighty-Two dollars (\$765,882). The Grant Spending Plan will constitute the maximum amount to be provided to the Recipient by Metro for all of the Recipient's obligations hereunder. The Grant Spending Plan line items include, but are not limited to, all applicable taxes, fees, overhead, and all other direct and indirect costs incurred or to be incurred by the Recipient.

Subject to modification and amendments as provided in section D.2 of this agreement, this amount will constitute the Grant Amount and the entire compensation to be provided to the Recipient by Metro.

Grant contract between the Metropolitan Government of Nashville and Davidson County and Vanderbilt University Medical Center Contract #_____

- C.2. **Payment Methodology.** The Recipient will only be compensated for actual costs based upon the Grant Spending Plan, not to exceed the maximum liability established in Section C.1

Upon progress toward the completion of the work, as described in Section A of this Grant Contract, the Recipient shall submit invoices and any supporting documentation as requested by Metro to demonstrate that the funds are used as required by this Grant, prior to any payment for allowable costs. Such invoices shall be submitted no more often than monthly and indicate at a minimum the amount charged by Spending Plan line-item for the period invoiced, the amount charged by line-item to date, the total amount charged for the period invoiced, and the total amount charged under this Grant Contract to date.

Recipient must send all invoices to Metro Public Health Department, Beverly.glaze-johnson@nashville.gov.

Final invoices for the contract period should be received by April 15, 2027. Any invoice not received by the deadline date will not be processed and all remaining grant funds will expire.

- C.3. **Annual Expenditure Report.** The Recipient must submit a final grant Annual Expenditure Report, to be received by Metro Public Health Department, within forty-five (45) days of the end of the Grant Contract. Said report must be in form and substance acceptable to Metro and must be prepared by a Certified Public Accounting Firm or the Chief Financial Officer of the Recipient Organization.
- C.4. **Payment of Invoice.** The payment of any invoice by Metro will not prejudice Metro's right to object to the invoice or any other related matter. Any payment by Metro will neither be construed as acceptance of any part of the work or service provided nor as an approval of any of the costs included therein.
- C.5. **Unallowable Costs.** The Recipient's invoice may be subject to reduction for amounts included in any invoice or payment theretofore made which are determined by Metro, on the basis of audits or monitoring conducted in accordance with the terms of this Grant Contract, to constitute unallowable costs. Any unallowable cost discovered after payment of the final invoice shall be returned by the Recipient to Metro within fifteen (15) days of notice.
- C.6. **Deductions.** Metro reserves the right to adjust any amounts which are or become due and payable to the Recipient by Metro under this or any Contract by deducting any amounts which are or become due and payable to Metro by the Recipient under this or any Contract.
- C.7. **Travel Compensation.** Payment to the Recipient for travel, meals, or lodging is subject to amounts and limitations specified in Metro's Travel Regulations and subject to the Grant Spending Plan.
- C.8. **Electronic Payment.** Metro requires as a condition of this contract that the Recipient have on file with Metro a completed and signed "ACH Form for Electronic Payment". If Recipient has not previously submitted the form to Metro or if Recipient's information has changed, Recipient will have thirty (30) days to complete, sign, and return the form. Thereafter, all payments to the Recipient, under this or any other contract the Recipient has with Metro, must be made electronically.

D. STANDARD TERMS AND CONDITIONS:

- D.1. **Required Approvals.** Metro is not bound by this Grant Contract until it is approved by the appropriate Metro representatives as indicated on the signature page of this Grant and approved by the Metropolitan Council.

Grant contract between the Metropolitan Government of Nashville and Davidson County and Vanderbilt University Medical Center Contract #_____

- D.2. **Modification and Amendment.** This Grant Contract may be modified only by a written amendment that has been approved in accordance with all Metro procedures and by appropriate legislation of the Metropolitan Council.
- D.3. **Termination - Cause.** Metro shall have the right to terminate this Grant Contract immediately if Metro determines that Recipient, its employees or principals have engaged in conduct or violated any federal, state or local laws which affect the ability of Recipient to effectively provide services under this Grant Contract. Should the Recipient fail to properly perform its obligations under this Grant Contract or if the Recipient violates any terms of this Grant Contract, Metro will have the right to immediately terminate the Grant Contract and the Recipient must return to Metro any and all grant monies for services or programs under the grant not performed as of the termination date. The Recipient must also return to Metro any and all funds expended for purposes contrary to the terms of the Grant Contract. Such termination will not relieve the Recipient of any liability to Metro for damages sustained by virtue of any breach by the Recipient.
- D.4. **Termination - Notice.** Metro may terminate the Grant Contract without cause for any reason. Said termination shall not be deemed a breach of Contract by Metro. Metro shall give the Recipient at least thirty (30) days written notice before effective termination date.
- a. The Recipient shall be entitled to receive compensation for satisfactory, authorized service completed as of the effective termination date, but in no event shall Metro be liable to the Recipient for compensation for any service that has not been rendered.
- b. Upon such termination, the Recipient shall have no right to any actual general, special, incidental, consequential or any other damages whatsoever of any description or amount.
- D.5. **Termination - Funding.** The Grant Contract is subject to the appropriation and availability of local, State and/or Federal funds. In the event that the funds are not appropriated or are otherwise unavailable, Metro shall have the right to terminate the Grant Contract immediately upon written notice to the Recipient. Upon receipt of the written notice, the Recipient shall cease all work associated with the Grant Contract on or before the effective termination date specified in the written notice. Should such an event occur, the Recipient shall be entitled to compensation for all satisfactory and authorized services completed as of the effective termination date. The Recipient shall be responsible for repayment of any funds already received in excess of satisfactory and authorized services completed as of the effective termination date.
- D.6. **Subcontracting.** The Recipient shall not assign this Grant Contract or enter into a subcontract for any of the services performed under this Grant Contract without obtaining the prior written approval of Metro. Notwithstanding any use of approved Sub-Grantee, the Recipient will be considered the prime Recipient and will be responsible for all work performed.
- D.7. **Conflicts of Interest.** The Recipient warrants that no part of the total Grant Amount will be paid directly or indirectly to an employee or official of Metro as wages, compensation, or gifts in exchange for acting as an officer, agent, employee, subcontractor, or consultant to the Recipient in connection with any work contemplated or performed relative to this Grant Contract.
- D.8. **Nondiscrimination.** The Recipient hereby agrees, warrants, and assures that no person will be excluded from participation in, be denied benefits of, or be otherwise subjected to discrimination in the performance of this Grant Contract or in the employment practices of the Recipient on the grounds of disability, age, race, color, religion, sex, national origin, or any other classification which is in violation of applicable laws. The Recipient must, upon request, show proof of such nondiscrimination and must post in conspicuous places, available to all employees and applicants, notices of nondiscrimination.

Grant contract between the Metropolitan Government of Nashville and Davidson County and Vanderbilt University Medical Center Contract # _____

- D.9. **Records.** The Recipient must maintain documentation for all charges to Metro under this Grant Contract. The books, records, and documents of the Recipient, insofar as they relate to work performed or money received under this Grant Contract, must be maintained for a period of three (3) full years from the date of the final payment or until the Recipient engages a licensed independent public accountant to perform an audit of its activities. The books, records, and documents of the Recipient insofar as they relate to work performed or money received under this Grant Contract are subject to audit at any reasonable time and upon reasonable notice by Metro or its duly appointed representatives. Records must be maintained in accordance with the standards outlined in the Metro Non-Profit Grants Manual. The financial statements must be prepared in accordance with generally accepted accounting principles.
- D.10. **Monitoring.** The Recipient's activities conducted and records maintained pursuant to this Grant Contract are subject to monitoring and evaluation by The Metropolitan Office of Financial Accountability or Metro's duly appointed representatives. The Recipient must make all audit, accounting, or financial records, notes, and other documents pertinent to this grant available for review by the Metropolitan Office of Financial Accountability, Internal Audit or Metro's representatives, upon request, during normal working hours.
- D.11. **Reporting.** The Recipient must submit a Quarterly Program Report to be received by Metro Public Health Department, within thirty (30) days of the end of the quarter and a Final Program Report, to be received by Metro Public Health Department, within forty-five (45) days of the end of the Grant Contract. Said reports shall detail the outcome of the activities funded under this Grant Contract.
- D.12. **Strict Performance.** Failure by Metro to insist in any one or more cases upon the strict performance of any of the terms, covenants, conditions, or provisions of this agreement is not a waiver or relinquishment of any such term, covenant, condition, or provision. No term or condition of this Grant Contract is considered to be waived, modified, or deleted except by a written amendment by the appropriate parties as indicated on the signature page of this Grant.
- D.13. **Insurance.** The Recipient agrees to carry adequate public liability and other appropriate forms of insurance, and to pay all applicable taxes incident to this Grant Contract.
- D.14. **Metro Liability.** Metro will have no liability except as specifically provided in this Grant Contract.
- D.15. **Independent Contractor.** Nothing herein will in any way be construed or intended to create a partnership or joint venture between the Recipient and Metro or to create the relationship of principal and agent between or among the Recipient and Metro. The Recipient must not hold itself out in a manner contrary to the terms of this paragraph. Metro will not become liable for any representation, act, or omission of any other party contrary to the terms of this paragraph.
- D.16. **Indemnification and Hold Harmless.**
- a. Recipient agrees to indemnify, defend, and hold harmless Metro, its officers, agents and employees from any claims, damages, penalties, costs and attorney fees for injuries or damages arising, in part or in whole, from the negligent or intentional acts or omissions of Recipient, its officers, employees and/or agents, including its sub or independent Grantees, in connection with the performance of the contract, and any claims, damages, penalties, costs and attorney fees arising from any failure of Recipient, its officers, employees and/or agents, including its sub or independent Grantees, to observe applicable laws, including, but not limited to, labor laws and minimum wage laws.
 - b. Metro will not indemnify, defend or hold harmless in any fashion the Recipient from any claims, regardless of any language in any attachment or other document that the Recipient may provide.

Grant contract between the Metropolitan Government of Nashville and Davidson County and Vanderbilt University Medical Center Contract #_____

- c. Recipient will pay Metro any expenses incurred as a result of Recipient's failure to fulfill any obligation in a professional and timely manner under this Contract.
- d. Recipient's duties under this section will survive the termination or expiration of the grant.
- D.17. **Force Majeure.** "Force Majeure Event" means fire, flood, earthquake, elements of nature or acts of God, wars, riots, civil disorders, rebellions or revolutions, acts of terrorism or any other similar cause beyond the reasonable control of the party. Except as provided in this Section, any failure or delay by a party in the performance of its obligations under this Grant Contract arising from a Force Majeure Event is not a breach under this Grant Contract. The non-performing party will be excused from performing those obligations directly affected by the Force Majeure Event, and only for as long as the Force Majeure Event continues, provided that the party continues to use diligent, good faith efforts to resume performance without delay. Recipient will promptly notify Metro within forty-eight (48) hours of any delay caused by a Force Majeure Event and will describe in reasonable detail the nature of the Force Majeure Event.
- D.18. **Iran Divestment Act.** In accordance with the Iran Divestment Act, Tennessee Code Annotated § 12-12-101 et seq., Recipient certifies that to the best of its knowledge and belief, neither Recipient nor any of its subcontractors are on the list created pursuant to Tennessee Code Annotated § 12-12-106. Misrepresentation may result in civil and criminal sanctions, including contract termination, debarment, or suspension from being a contractor or subcontractor under Metro contracts.
- D.19. **State, Local and Federal Compliance.** The Recipient agrees to comply with all applicable federal, state and local laws and regulations in the performance of this Grant Contract. Metro shall have the right to terminate this Grant Contract at any time for failure of Recipient to comply with applicable federal, state or local laws in connection with the performance of services under this Grant Contract.
- D.20. **Governing Law and Venue.** The validity, construction and effect of this Grant Contract and any and all extensions and/or modifications thereof will be governed by and construed in accordance with the laws of the State of Tennessee. The venue for legal action concerning this Grant Contract will be in the courts of Davidson County, Tennessee.
- D.21. **Completeness.** This Grant Contract is complete and contains the entire understanding between the parties relating to the subject matter contained herein, including all the terms and conditions of the parties' agreement. This Grant Contract supersedes any and all prior understandings, representations, negotiations, and agreements between the parties relating hereto, whether written or oral.
- D.22. **Headings.** Section headings are for reference purposes only and will not be construed as part of this Grant Contract.
- D.23. **Severability.** In the event any provision of this Agreement is rendered invalid or unenforceable, said provision(s) hereof will be immediately void and may be renegotiated for the sole purpose of rectifying the error. The remainder of the provisions of this Agreement not in question shall remain in full force and effect.
- D.24. **Metro Interest in Equipment.** The Recipient will take legal title to all equipment and to all motor vehicles, hereinafter referred to as "equipment," purchased totally or in part with funds provided under this Grant Contract, subject to Metro's equitable interest therein, to the extent of its *pro rata* share, based upon Metro's contribution to the purchase price. "Equipment" is defined as an article of nonexpendable, tangible, personal property having a useful life of more than one year and an acquisition cost which equals or exceeds Five Thousand dollars (\$5,000).

Grant contract between the Metropolitan Government of Nashville and Davidson County and Vanderbilt University Medical Center Contract #_____

The Recipient agrees to be responsible for the accountability, maintenance, management, and inventory of all property purchased totally or in part with funds provided under this Grant Contract. Upon termination of the Grant Contract, where a further contractual relationship is not entered into, or at any time during the term of the Grant Contract, the Recipient must request written approval from Metro for any proposed disposition of equipment purchased with Grant funds. All equipment must be disposed of in such a manner as parties may agree as appropriate and in accordance with any applicable federal, state or local laws or regulations.

- D.25. **Assignment—Consent Required.** The provisions of this contract will inure to the benefit of and will be binding upon the respective successors and assignees of the parties hereto. Except for the rights of money due to Recipient under this contract, neither this contract nor any of the rights and obligations of Recipient hereunder may be assigned or transferred in whole or in part without the prior written consent of Metro. Any such assignment or transfer will not release Recipient from its obligations hereunder. Notice of assignment of any rights to money due to Recipient under this Contract must be sent to the attention of the Metro Department of Finance.
- D.26. **Gratuities and Kickbacks.** It will be a breach of ethical standards for any person to offer, give or agree to give any employee or former employee, or for any employee or former employee to solicit, demand, accept or agree to accept from another person, a gratuity or an offer of employment in connection with any decision, approval, disapproval, recommendation, preparations of any part of a program requirement or a purchase request, influencing the content of any specification or procurement standard, rendering of advice, investigation, auditing or in any other advisory capacity in any proceeding or application, request for ruling, determination, claim or controversy in any proceeding or application, request for ruling, determination, claim or controversy or other particular matter, pertaining to any program requirement of a contract or subcontract or to any solicitation or proposal therefore. It will be a breach of ethical standards for any payment, gratuity or offer of employment to be made by or on behalf of a Sub-Grantee under a contract to the prime Grantee or higher tier Sub-Grantee or a person associated therewith, as an inducement for the award of a subcontract or order. Breach of the provisions of this paragraph is, in addition to a breach of this contract, a breach of ethical standards which may result in civil or criminal sanction and/or debarment or suspension from participation in Metropolitan Government contracts.
- D.27. **Communications and Contacts.** All instructions, notices, consents, demands, or other communications from the Recipient required or contemplated by this Grant Contract must be in writing and must be made by email transmission, or by first class mail, addressed to the respective party at the appropriate email or physical address as set forth below or to such other party, email, or address as may be hereafter specified by written notice.

Metro

For contract-related matters:
Metro Public Health Department
2500 Charlotte Avenue
Nashville, TN 37209
(615) 340-8900
Holly.Rice@nashville.gov

For inquiries regarding invoices:
Metro Public Health Department
2500 Charlotte Avenue
Nashville, TN 37209
(615) 340-5634
Nancy.Uribe@nashville.gov

Recipient

Scott Kilgore, scott.kilgore@vumc.org
With a copy to: Office of Sponsored Programs, Contracts Management
Research.contracts@vumc.org

- D.28. **Lobbying.** The Recipient certifies, to the best of its knowledge and belief, that:

Grant contract between the Metropolitan Government of Nashville and Davidson County and Vanderbilt University Medical Center Contract # _____

- a. No federally appropriated funds have been paid or will be paid, by or on behalf of the Recipient, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, and entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.
 - b. If any funds other than federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this grant, loan, or cooperative agreement, the Recipient must complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
 - c. The Recipient will require that the language of this certification be included in the award documents for all sub-awards at all tiers (including sub-grants, subcontracts, and contracts under grants, loans, and cooperative agreements) and that all subcontractors of federally appropriated funds shall certify and disclose accordingly.
- D.29. Certification Regarding Debarment and Convictions.**
- a. Recipient certifies that Recipient, and its current and future principals:
 - i. are not presently debarred, suspended, or proposed for debarment from participation in any federal or state grant program;
 - ii. have not within a three (3) year period preceding this Grant Contract been convicted of fraud, or a criminal offence in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) grant;
 - iii. have not within a three (3) year period preceding this Grant Contract been convicted of embezzlement, obstruction of justice, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property; and
 - iv. are not presently indicted or otherwise criminally charged by a government entity (federal, state, or local) with commission of any of the offenses detailed in Sections D.29(a)(ii) and D.29(a)(iii) of this certification.
 - b. Recipient shall provide immediate written notice to Metro if at any time Recipient learns that there was an earlier failure to disclose information or that due to changed circumstances, its principals fall under any of the prohibitions of Section D.29(a).
- D.30. Effective Date.** This contract will not be binding upon the parties until it has been signed first by the Recipient and then by the authorized representatives of the Metropolitan Government and has been filed in the office of the Metropolitan Clerk. When it has been so signed and filed, this contract will be effective as of the date first written above.
- D.31. Health Insurance Portability and Accountability Act.** Metro and Recipient shall comply with obligations under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") and its accompanying regulations.
- a. Recipient warrants that it is familiar with the requirements of HIPAA and its accompanying regulations and will comply with all applicable HIPAA requirements in the course of this Agreement.

Grant contract between the Metropolitan Government of Nashville and Davidson County and Vanderbilt University Medical Center Contract #_____

- b. Recipient warrants that it will cooperate with Metro, including cooperation and coordination with Metro privacy officials and other compliance officers required by HIPAA and its regulations, in the course of performance of this Agreement so that both parties will be in compliance with HIPAA.
- c. Recipient agrees to sign documents, including but not limited to Business Associate agreements, as required by HIPAA and that are reasonably necessary to keep Metro and Recipient in compliance with HIPAA. This provision shall not apply if information received by the Recipient from Metro under this Agreement is not "protected health information" as defined by HIPAA, or if HIPAA permits Recipient and Metro to receive such information without entering into a Business Associate agreement or signing another such document.

D.32. **Federal Funding Accountability and Transparency Act (FFATA).** This Grant Contract requires the Recipient to provide supplies or services that are funded in whole or in part by federal funds that are subject to FFATA. The Recipient is responsible for ensuring that all applicable FFATA requirements, including but not limited to those below, are met and that the Recipient provides information to the Metro as required.

The Recipient shall comply with the following:

- a. Reporting of Total Compensation of the Recipient's Executives.
 - i. The Recipient shall report the names and total compensation of each of its five most highly compensated executives for the Recipient's preceding completed fiscal year, if in the Recipient's preceding fiscal year, it received:
 - (1) Eighty percent (80%) or more of the Recipient's annual gross revenues from Federal procurement contracts and federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards); and
 - (2) Twenty-Five Million Dollars (\$25,000,000) or more in annual gross revenues from federal procurement contracts (and subcontracts), federal financial assistance subject to the Transparency Act (and subawards); and
 - (3) The public does not have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. § 78m(a), 78o(d)) or § 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <http://www.sec.gov/answers/execomp.htm>).
 - As defined in 2 C.F.R. § 170.315, "Executive" means officers, managing partners, or any other employees in management positions.
 - ii. Total compensation means the cash and noncash dollar value earned by the executive during the Recipient's preceding fiscal year and includes the following (for more information see 17 CFR § 229.402(c)(2)):
 - (1) Salary and bonus.
 - (2) Awards of stock, stock options, and stock appreciation rights. Use the dollar amount recognized for financial statement reporting purposes with respect to the fiscal year in accordance with the Statement of Financial Accounting Standards No. 123 (Revised 2004) (FAS 123R), Shared Based Payments.

**Grant contract between the Metropolitan Government of Nashville and Davidson County and
Vanderbilt University Medical Center Contract #_____**

- (3) Earnings for services under non-equity incentive plans. This does not include group life, health, hospitalization or medical reimbursement plans that do not discriminate in favor of executives and are available generally to all salaried employees.
 - (4) Change in pension value. This is the change in present value of defined benefit and actuarial pension plans.
 - (5) Above-market earnings on deferred compensation which is not tax qualified.
 - (6) Other compensation, if the aggregate value of all such other compensation (e.g. severance, termination payments, value of life insurance paid on behalf of the employee, perquisites or property) for the executive exceeds Ten Thousand dollars (\$10,000).
- b. The Recipient must report executive total compensation described above to Metro by the end of the month during which this Grant Contract is established.
 - c. If this Grant Contract is amended to extend its term, the Recipient must submit an executive total compensation report to the Metro by the end of the month in which the amendment to this Grant Contract becomes effective.
 - d. The Recipient will obtain a Unique Entity Identifier and maintain its number for the term of this Grant Contract. More information about obtaining a Unique Entity Identifier can be found at: <https://www.sam.gov>.

The Recipient's failure to comply with the above requirements is a material breach of this Grant Contract for which Metro may terminate this Grant Contract for cause. Metro will not be obligated to pay any outstanding invoice received from the Recipient unless and until the Recipient is in full compliance with the above requirements.

D.33. **Assistance Listing Number.** When applicable, the Recipient shall inform its licensed independent public accountant of the federal regulations that require compliance with the performance of an audit. This information shall consist of the following Assistance Listing Numbers:

- a. 93.914 HIV Emergency Relief Project Grants.

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**Grant contract between the Metropolitan Government of Nashville and Davidson County and
Vanderbilt University Medical Center Contract #_____**

Recipient: Vanderbilt University Medical Center



By: _____

Jane E. Freedman, MD, Deputy CEO and Chief Health System
Officer

Title: _____

Sworn to and subscribed to before me, a Notary Public this _____
day of _____, 2026, by _____, the
_____ of Contractor and duly authorized to execute
this instrument on Contractor's behalf.

Notary Public: _____

My Commission Expires: _____

Grant contract between the Metropolitan Government of Nashville and Davidson County and
Vanderbilt University Medical Center Contract #_____

METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY

Signed by:

Sanni Areda

0872295CD81A4B1...

Director, Metro Public Health Department

5/29/2026

Date

Signed by:

Tené Hamilton Franklin

BEBF0BBF14D14B0...

Chair, Board of Health

5/29/2026

Date

APPROVED AS TO AVAILABILITY OF FUNDS:

Signed by:

Jennene Reed/mjw

62377A2A8742460...

Director, Department of Finance

Initial

BN

DS

AP

6/1/2026

Date

APPROVED AS TO RISK AND INSURANCE:

Signed by:

Balogun Cobb

68804BE12ED741C...

Director of Risk Management Services

6/1/2026

Date

APPROVED AS TO FORM AND LEGALITY:

Signed by:

Matthew Garth

66F60922930844F...

Metropolitan Attorney

6/2/2026

Date

FILED:

Metropolitan Clerk

Date

**Grant contract between the Metropolitan Government of Nashville and Davidson County and
Vanderbilt University Medical Center Contract #_____**

Table of Contents of Attachments:

- A. Grant Spending Plan
- B. Application
- C. Certificate of Assurance
- D. Non-Profit Grants Manual Receipt Acknowledgement
- E. Internal Revenue Service 501(c)(3) Tax-Exempt Organization Letter and Tennessee
Secretary of State Non-Profit Confirmation
- F. Non-Profit Charter
- G. Independent Audit completed by Certified Public Accountant
- H. Certificate of Insurance

ATTACHMENT A**GRANT BUDGET (BUDGET PAGE 1)****VUMC Rollup**

APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the grant period.

Object Line-item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY ¹ (detail schedule(s) attached as applicable)	GRANT CONTRACT	GRANTEE MATCH 3	TOTAL PROJECT
1	Salaries ²	\$185,600.00	\$ -	\$ 185,600.00
2	Benefits & Taxes	\$54,000.00	\$ -	\$ 54,000.00
4, 15	Professional Fee/ Grant & Award ²	\$0.00	\$ -	\$ -
5	Supplies	\$13,000.00	\$ -	\$ 13,000.00
6	Telephone	\$0.00	\$ -	\$ -
7	Postage & Shipping	\$0.00	\$ -	\$ -
8	Occupancy	\$0.00	\$ -	\$ -
9	Equipment Rental & Maintenance	\$1,000.00	\$ -	\$ 1,000.00
10	Printing & Publications	\$0.00	\$ -	\$ -
11, 12	Travel/ Conferences & Meetings ²	\$0.00	\$ -	\$ -
13	Interest ²	\$0.00	\$ -	\$ -
14	Insurance	\$0.00	\$ -	\$ -
16	Specific Assistance To Individuals ²	\$0.00	\$ -	\$ -
17	Depreciation ²	\$0.00	\$ -	\$ -
18	Other Non-Personnel ²	\$486,922.00	\$ -	\$ 486,922.00
20	Capital Purchase ²	\$0.00	\$ -	\$ -
22	Indirect Cost (0% of S&B)	\$25,360.00	\$ -	\$ 25,360.00
24	In-Kind Expense	\$0.00	\$ -	\$ -
25	GRAND TOTAL	\$ 765,882.00	\$ -	\$ 765,882.00

¹ Each expense object line-item shall be defined by the Department of Finance and Administration Policy 03, *Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A*. (posted on the Internet at: <https://www.tn.gov/assets/entities/finance/attachments/policy3.pdf>).

² Applicable detail follows this page if line-item is funded.

³ A Grantee Match Requirement is detailed by this Grant Budget, and the maximum total amount reimbursable by the State pursuant to this Grant Contract, as detailed by the "Grant Contract" column above, shall be reduced by the amount of any Grantee failure to meet the Match Requirement.

ATTACHMENT A**GRANT BUDGET****(BUDGET PAGE 1)****Medical Case Management****APPLICABLE PERIOD:** The grant budget line-item amounts below shall be applicable only to expense incurred during the grant period.

Object Line-item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY ¹ (detail schedule(s) attached as applicable)	GRANT CONTRACT	GRANTEE MATCH ³	TOTAL PROJECT
1	Salaries ²	\$125,700.00	\$0.00	\$125,700.00
2	Benefits & Taxes	\$36,600.00	\$0.00	\$36,600.00
4, 15	Professional Fee/ Grant & Award ²	\$0.00	\$0.00	\$0.00
5	Supplies	\$8,500.00	\$0.00	\$8,500.00
6	Telephone	\$0.00	\$0.00	\$0.00
7	Postage & Shipping	\$0.00	\$0.00	\$0.00
8	Occupancy	\$0.00	\$0.00	\$0.00
9	Equipment Rental & Maintenance	\$500.00	\$0.00	\$500.00
10	Printing & Publications	\$0.00	\$0.00	\$0.00
11, 12	Travel/ Conferences & Meetings ²	\$0.00	\$0.00	\$0.00
13	Interest ²	\$0.00	\$0.00	\$0.00
14	Insurance	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals ²	\$0.00	\$0.00	\$0.00
17	Depreciation ²	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel ²	\$0.00	\$0.00	\$0.00
20	Capital Purchase ²	\$0.00	\$0.00	\$0.00
22	Indirect Cost (0% of S&B)	\$17,130.00	\$0.00	\$17,130.00
24	In-Kind Expense	\$0.00	\$0.00	\$0.00
25	GRAND TOTAL	\$188,430.00	\$0.00	\$188,430.00

¹ Each expense object line-item shall be defined by the Department of Finance and Administration Policy 03, *Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A*. (posted on the Internet at: <https://www.tn.gov/assets/entities/finance/attachments/policy3.pdf>).

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GRANT BUDGET LINE-ITEM DETAIL
(BUDGET PAGE 2)

SALARIES						AMOUNT
Name - Title	Salary	x	Percentage of Time	+	Longevity Bonus	
Ashley Hall -- Social Worker	\$ 82,281.00	x	30%	+		\$ 24,684.30
Deborah Smith -- Social Worker	\$ 75,720.00	x	30%	+		\$ 22,716.00
Jessica Ruble -- Social Worker	\$ 89,053.00	x	30%	+		\$ 26,715.90
LaDonya Taylor -- Social Worker	\$ 84,820.00	x	30%	+		\$ 25,446.00
Reena Dean -- Social Worker	\$ 87,134.00	x	30%	+		\$ 26,140.20
ROUNDED TOTAL						\$ 125,700.00

ATTACHMENT A**GRANT BUDGET****(BUDGET PAGE 1)****Mental Health**

APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the grant period.

Object Line-item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY ¹ (detail schedule(s) attached as applicable)	GRANT CONTRACT	GRANTEE MATCH ³	TOTAL PROJECT
1	Salaries ²	\$59,900.00	\$0.00	\$59,900.00
2	Benefits & Taxes	\$17,400.00	\$0.00	\$17,400.00
4, 15	Professional Fee/ Grant & Award ²	\$0.00	\$0.00	\$0.00
5	Supplies	\$4,500.00	\$0.00	\$4,500.00
6	Telephone	\$0.00	\$0.00	\$0.00
7	Postage & Shipping	\$0.00	\$0.00	\$0.00
8	Occupancy	\$0.00	\$0.00	\$0.00
9	Equipment Rental & Maintenance	\$500.00	\$0.00	\$500.00
10	Printing & Publications	\$0.00	\$0.00	\$0.00
11, 12	Travel/ Conferences & Meetings ²	\$0.00	\$0.00	\$0.00
13	Interest ²	\$0.00	\$0.00	\$0.00
14	Insurance	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals ²	\$0.00	\$0.00	\$0.00
17	Depreciation ²	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel ²	\$0.00	\$0.00	\$0.00
20	Capital Purchase ²	\$0.00	\$0.00	\$0.00
22	Indirect Cost (10% of S&B)	\$8,230.00	\$0.00	\$8,230.00
24	In-Kind Expense	\$0.00	\$0.00	\$0.00
25	GRAND TOTAL	\$90,530.00	\$0.00	\$90,530.00

¹ Each expense object line-item shall be defined by the Department of Finance and Administration Policy 03, *Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A*. (posted on the Internet at: <https://www.tn.gov/assets/entities/finance/attachments/policy3.pdf>).

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GRANT BUDGET LINE-ITEM DETAIL
(BUDGET PAGE 2)

SALARIES					AMOUNT
Name - Title	Salary	x	Percentage of Time	+ Longevity Bonus	
LaToya Johnson -- Social Worker/Behavioral Health Consultant	\$ 63,263.00	x	45%	+	\$ 28,468.35
Sophia Shefner -- Social Worker/Behavioral Health Consultant	\$ 69,806.00	x	45%	+	\$ 31,412.70
ROUNDED TOTAL					\$ 59,900.00

ATTACHMENT A**GRANT BUDGET****(BUDGET PAGE 1)****Outpatient Ambulatory****APPLICABLE PERIOD:** The grant budget line-item amounts below shall be applicable only to expense incurred during the grant period.

Object Line-item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY ¹ (detail schedule(s) attached as applicable)	GRANT CONTRACT	GRANTEE MATCH ³	TOTAL PROJECT
1	Salaries ²	\$0.00	\$0.00	\$0.00
2	Benefits & Taxes	\$0.00	\$0.00	\$0.00
4, 15	Professional Fee/ Grant & Award ²	\$0.00	\$0.00	\$0.00
5	Supplies	\$0.00	\$0.00	\$0.00
6	Telephone	\$0.00	\$0.00	\$0.00
7	Postage & Shipping	\$0.00	\$0.00	\$0.00
8	Occupancy	\$0.00	\$0.00	\$0.00
9	Equipment Rental & Maintenance	\$0.00	\$0.00	\$0.00
10	Printing & Publications	\$0.00	\$0.00	\$0.00
11, 12	Travel/ Conferences & Meetings ²	\$0.00	\$0.00	\$0.00
13	Interest ²	\$0.00	\$0.00	\$0.00
14	Insurance	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals ²	\$0.00	\$0.00	\$0.00
17	Depreciation ²	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel ²	\$486,922.00	\$0.00	\$486,922.00
20	Capital Purchase ²	\$0.00	\$0.00	\$0.00
22	Indirect Cost (0% of S&B)	\$0.00	\$0.00	\$0.00
24	In-Kind Expense	\$0.00	\$0.00	\$0.00
25	GRAND TOTAL	\$486,922.00	\$0.00	\$486,922.00

¹ Each expense object line-item shall be defined by the Department of Finance and Administration Policy 03, *Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A*. (posted on the Internet at: <https://www.tn.gov/assets/entities/finance/attachments/policy3.pdf>).

² Applicable detail follows this page if line-item is funded.

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GRANT BUDGET LINE-ITEM DETAIL
(BUDGET PAGE 2)

OTHER NON-PERSONNEL	AMOUNT
laboratory testing, non-laboratory medical services, specialty care, and medical care for HIV-related services for uninsured Ryan White Part A clients	\$486,922.00
ROUNDED TOTAL	\$ 486,922.00

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI
Organization and Team Qualifications

A. Organization & Team Qualifications (25 Points)

I. Organization Background:

1. Describe in detail the background of your agency. Include the purpose of your organization, years of experience in providing services to People Living With HIV/AIDS (PLWHAs) and the years of providing these services (note if any HIV specific services are provided and/or if you currently collaborate with an HIV agency) and number of unduplicated persons served last year.
2. Describe in detail the current HIV counseling and testing capacity of your organization, and any existing collaborative arrangements with other organizations within your service area that provide HIV counseling and testing services.
3. Describe in detail how the proposed project fits with your agency's mission and capabilities?
4. Describe in detail how your background, mission and past experience contribute to the ability of your organization to conduct the proposed project and meet the expectations of the program requirements. In addition, Metro Health may conduct pre-award on-site visits to determine if the contractor's facilities are appropriate for the services intended.

General Background, Experience, and Services

The Vanderbilt Comprehensive Care Clinic (VCCC), originally called Comprehensive Care Center, opened on February 1st, 1994, after years of planning by regional healthcare, business, and government agencies. Throughout the planning process, the Nashville Mayor's office coordinated a community-wide effort that involved all stakeholders, including PLWHA and their families. At the time that the VCCC opened, there was no effective treatment for HIV and almost all clients progressed to AIDS. Today, the VCCC provides state-of-the-art medical and wraparound support services to PLWHA. The VCCC's care centers around reducing HIV viral load in clients to undetectable levels, limiting the risk of disease transmission, and supporting clients' changing medical needs as they age.

During its 30-plus year history of treating PLWHA, the VCCC has served over 10,000 clients and has developed a world-class environment where clients receive care in a safe, supportive, and compassionate setting. The number of unduplicated clients in Calendar Year (CY) 2024 was 3,811.

Because the VCCC is managed by the Vanderbilt University Medical Center (VUMC), a major academic research institution, and housed in VUMC's Infectious Disease department, the VCCC's clients receive care that aligns with the latest research and best practices. In addition to HIV care, the VCCC also provides primary care to over 80% of its clients and is certified as Primary Care Medical Home by the Joint Commission. The VCCC providers include nine infectious diseases specialists certified as HIV primary care physicians and three nurse practitioners. In total, VCCC providers have more than 120 years of cumulative experience providing healthcare to PLWHA at the VCCC.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Organization and Team Qualifications

More information on the comprehensive medical care that the VCCC provides to PLWHA within the Nashville Transitional Grant Area (TGA) and throughout Middle Tennessee is detailed below. These services are provided regardless of a client's race, ethnicity, gender, class, sexual orientation, or financial status.

Adolescent and Pediatric HIV Care and Transition to Adult Care

The Adolescent and Pediatric HIV Care provides treatment to PLWHA who are children, teens, or young adults. HIV care is provided by experts from VUMC's Adolescent and Pediatric Infectious Disease program in consultation with providers at the VCCC. As adolescent PLWHA age, the goal is to transition them to care at VCCC by the age of 25. Strategies to achieve this include personalized facility tours and open, continuous communication between the individual transitioning to adult care, their prior provider, VCCC providers, and VCCC staff, including behavioral health specialist to help clients adjust to adult care.

Anti-Retroviral Therapy (ART) Conference

There are several different options available to clients in terms of medications to treat HIV. The correct ART combination for each individual client is based on the client's characteristics, medical issues, and HIV genotype. Clients requiring a change to HIV medications, particularly in the setting of complex resistance mutations, drug-drug interactions, and adverse effects on their current regimen, are reviewed in an ART Conference, attended by expert HIV providers, the clinical pharmacist, behavior health specialists, and the client's case manager. These individuals review the multiple treatment options for the client and select the best. The client is then contacted by the Pathways team to begin treatment.

Clinical Trials

Clients are recruited to clinical trials at the VCCC based on the availability of a trial and the appropriateness of the trial intervention. Clinical trials may investigate many potential outcomes including new medications or strategies to treat HIV, identify complications or side effects of HIV drugs or treatments, identify other diseases and conditions associated with HIV, and compare the effectiveness of approved drugs. Clinical trial staff are primarily located on the fourth floor of the VCCC tower, and clients can meet with research staff as part of their clinical trial follow-up.

Dermatology

VCCC provides a twice-monthly dermatology clinic for VCCC clients staffed by Dr. Eva Parker, a board-certified dermatologist and expert in dermatology in immunocompromised clients. Services include examination and basic, in-office procedures such as biopsy and cryotherapy.

Nutrition Services

Nutrition services at the VCCC include nutrition consultations by a pharmacist who can assess a client's needs in terms of dietary modification, diabetes and pre-diabetes

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Organization and Team Qualifications

counseling, and counseling on and procurement of weight loss medications as recommended by the VCCC medical provider, such as GLP-1 receptor agonists. Clients may also be referred to a VUMC dietitian to address clinical problems such as obesity, high cholesterol, diabetes, and wasting.

Obstetrics Clinic (OC3)

The Obstetric Comprehensive Care Clinic (OC3) portion of the VCCC was formed in 1999 in collaboration with VUMC. Since that time, the OB clinic has delivered over 500 babies who are HIV negative. The OC3 consists of an on-site team made up of clinicians and case managers from the VCCC, Vanderbilt OB/GYN, and Vanderbilt Pediatric Infectious Diseases. The multidisciplinary team follows each woman and infant throughout the pregnancy and postpartum period. This collaboration now continues through the chest/breastfeeding period for clients who choose this option. Other OC3 services include pre-conception counseling, primary and specialty medical care, psychosocial services, logistical support and coordination, along with social service outreach and case management.

Pathways Program

All clients that are new to VCCC are assessed for and – if appropriate – enrolled into the Pathways program. This innovative approach to care addresses combines the expertise of VCCC’s clinical pharmacy services with personalized support from a Pathways Nurse Case Manager (PNCM) to help clients adjust to HIV care, limit the risk of virologic failure, reduce the chance of being lost to care, and limit the potential for transmitting HIV. Based on an intensive case management score, a social determinants of health assessment, and nursing judgement, new clients may be assigned to one of four levels of Pathways support (from least to most intensive support)

Through Pathways, a PNCM and pharmacy specialist help PLWHA overcome barriers and obtain medications, including through prior approvals, special programs, or based on financial need. The Pathways team also provides medication therapy management, supports medication reconciliation, and oversees medication adherence counseling. The goals of the Pathways team are to increase medication adherence and reduce the possibilities of an adverse drug event (ADE) or a potential adverse drug event (pADE).

Among VCCC’s client population are PLWHA who have significant mental health challenges and face multiple social barriers that may inhibit successful HIV management. These challenges prevent them from being fully engaged in their HIV medical care. Clients receive Pathways services until they reach their goals and then transition into the existing VCCC model of routine HIV medical care. Because Pathways is tailored to a client’s need, some clients may receive continuous support from the Pathways program throughout their time at the VCCC whereas other clients may transition out of the Pathways program rapidly. Clients may be enrolled in Pathways at any time. Typically, clients who are not in Pathways will be enrolled due to an observed increase in barriers to care, a reduction in medication adherence, or an increase in appointment no-shows or not scheduling follow-up care.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Organization and Team Qualifications

Psychiatric/Behavioral Health Services

Psychiatric and behavioral health services are provided to VCCC clients on an outpatient basis. The clinic employs one psychiatric nurse practitioner, supervised by a VUMC psychiatrist, and three behavioral health consultants who offer a full range of psychiatric and behavioral health services for clients. In addition to individual therapy, psychiatric and behavioral health service providers and staff consult for medication therapy management for clients identified with psychiatric co-morbidities and serve as the psychiatric expert resource for VCCC's ART case conference on issues affecting adherence and regimen selection. Furthermore, they conduct psychiatric evaluations, screen for and treat underlying psychiatric, substance abuse, or related concerns that may compromise medication adherence and client health. VCCC's approach to behavioral health incorporates a Behavioral Health Consultant (BHC) model to improve access to behavioral health services. The BHC model moves behavioral health care out of the therapist's office and into the exam room when the client's presenting issue is first identified, at which point the client, and the behavioral health consultant may develop an ongoing plan of care. This practice of meeting the client where they are has demonstrated significant improvement in access to behavioral health care. Brief assessment and careful assessment of follow-up needs allow for more efficient utilization of behavioral health services.

Social Services

Social services at the VCCC include medical case management, intake coordination, and social interventions as needed to help clients and their families deal with the multiple issues associated with an HIV diagnosis, including disclosure of diagnosis, eligibility for Ryan White services, family dynamics, health literacy, loss of health, medication adherence, overcoming barriers to care, and transitioning to new levels of care. In addition, the social work team is responsible for helping ensure clients have access to health insurance, which enables PLWHA to assess the care they need. Social workers assess a client's needs, facilitate the use of medical and community resources, and support the client through difficult psycho-social situations.

Specialized Diagnostic Services

High Resolution Anoscopy services are provided on-site at the VCCC. People living with HIV have an increased risk of anal cancer and this procedure detects and treats pre-malignant anal lesions.

Colposcopy services are provided on-site at the VCCC. Women living with HIV have an increased risk of cervical cancer and this procedure detects and treats pre-malignant anal lesions.

HIV Counseling and Testing Capacity

The VCCC is primarily a referral destination for community-based organizations (CBOs) who support PLWHA. The VCCC has strong collaborative relationships with organizations such as Nashville Cares, Street Works, Neighborhood Health, the First Response Center,

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Organization and Team Qualifications

the Nashville Metro Public Health Department (MPHD), the State of Tennessee Department of Health (TDOH), and county health departments within the TGA and throughout Middle Tennessee.

Because of its role as a health care provider to PLWHA, the VCCC will perform confirmatory testing for HIV, as appropriate. In addition, VCCC offers limited on-site testing, typically to the partners of the VCCC's clients; however, the VCCC does not provide testing to the public, nor does its staff conduct testing at community events where other HIV service agencies may provide rapid testing to individuals. Due to the limited nature of HIV funding, the VCCC works to not duplicate services offered by CBOs that serve PLWHA within the TGA and throughout Middle Tennessee.

New clients at VCCC receive a 90-minute psychosocial intake with a social worker who provides education about HIV, available programs, and services for PLWHA, and assists with adjusting to this new diagnosis. The social worker will also give the client a Social Determinants of Health assessment and receive financial information from the client to confirm eligibility for Ryan White services, including Ryan White Part A services outlined in this application.

After meeting with the social worker, the client meets with a PNCM for approximately 40 minutes to begin receiving the additional support through the Pathways program described earlier in this application. After meeting with the social worker and PNCM, the client is scheduled for an initial 40-minute intake with an HIV provider. Labs are taken prior to the initial provider meeting so that the medical information needed for prescribing ART treatments is available as soon as possible. In many cases, Rapid ART is initiated for clients prior to the initial meeting with the HIV provider.

Agency Mission and Capabilities

VUMC's mission is personalizing the client experience through our caring spirit and distinctive capabilities.

The mission of the Vanderbilt Comprehensive Care Clinic complements that of VUMC and is to provide quality medical care for people with HIV and AIDS by:

- Providing comprehensive, cost-effective, innovative, state-of-the-art medical procedures and treatments;
- Caring for individuals with HIV/AIDS with dignity, compassion, and hope;
- Helping these individuals and their caretakers access related services;
- Collaborating with healthcare institutions and organizations through research and education;
- Uniting the business, public, and medical sectors to support the VCCC.

The VCCC is the oldest and largest HIV medical facility in Tennessee, it was the first HIV Center of Excellence in the State and serves as a model for other HIV clinics in Tennessee.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Organization and Team Qualifications

Providing excellent HIV medical care is the primary focus of the clinic. The VCCC provides clients with ART, access to clinical trials, dermatology, nutrition services, obstetrics, psychiatric and behavioral health services, specialized diagnostics, medical case management through the clinic's Pathways team and social workers. The VCCC's Pathways teams helps clients adhere to treatment, reconcile their medications, anticipate and address safety issues, and obtain free or low-cost medications, as needed; the VCCC's social workers educate clients about HIV and assist them in adjusting to their diagnosis, provide behavioral health services, review eligibility for Ryan White services, and facilitate the use of medical and community resources.

Through an individualized, holistic approach to assisting in social supports and providing medical services to our clients, PLWHA, who are treated at the VCCC will have the resilience to overcome social stigma related to a positive HIV or AIDS diagnosis and the medical support necessary to optimize their health outcomes by minimizing their viral load and adapting their drug regimen to address their evolving health care needs.

Background, Mission, and Past Experience

The VCCC was founded to manage HIV primary care, limit unnecessary hospitalizations, reduce the length of hospital stays, lessen the use of emergency room visits, and reduce the use of facilities for terminal care while maintaining the optimal health of PLWHA.

Now in its 31st year, the VCCC manages an increasingly complex practice. The VCCC's HIV suppression rate in CY2023 and CY2024 exceeded 90% and the clinic's clients are leading longer, healthier lives. As a result, managing chronic conditions, co-morbidities, and diseases associated with aging are a new challenge that VCCC's providers are facing. Due to their changing and evolving health care needs, the VCCC has become a place of ongoing primary care for many of VCCC's clients.

The VCCC has used its extensive history treating PLWHA to share best practices with colleagues across Tennessee and beyond. While it has deep experience providing direct care, the VCCC continues to innovate with recent examples seen in its Pathways program and its Adolescent Transition program (which provides navigation for former pediatric PLWHA to the adult medical enterprise). The Adolescent Transition program includes a collaborative partnership with the Vanderbilt Pediatric Adolescent Health Clinic, which is the only pediatric HIV clinic in Middle Tennessee.

The VCCC is the appropriate entity to receive Ryan White Part A funds because of the clinic's deep expertise and commitment to treating PLWHA in the TGA. The VCCC's medical providers have over 120 cumulative years of experience providing care to PLWHA at the VCCC.

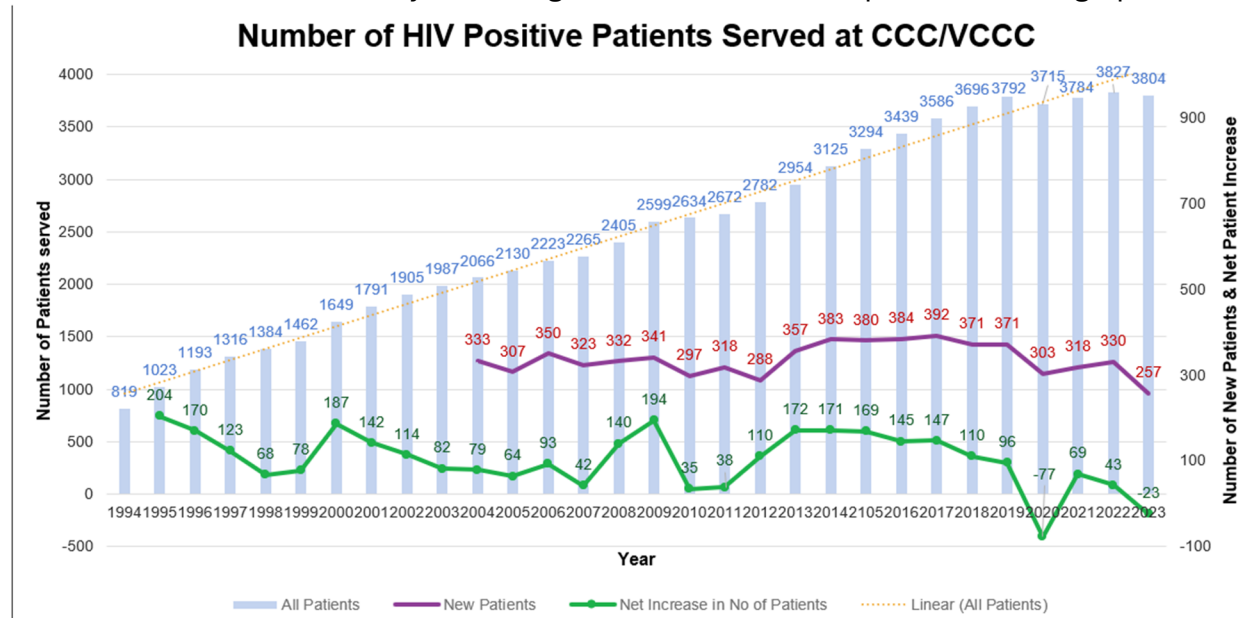
Since CY2019, the VCCC's overall client level has stayed stable, increasing slightly from 3,792 in CY2019 to 3,811 in CY2024. During that time, the VCCC also saw 1,208 new clients, implemented the use of the Pathways program for all new clients, and achieved a

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Organization and Team Qualifications

viral suppression rate of over 90% (91.3% in CY2023) for the first time in VCCC history. The VCCC is still finalizing its viral suppression rate for CY2024, but preliminary data indicates it will remain above 90%.

VCCC providers and staff have achieved all this despite the challenges of providing care during the COVID-19 epidemic, the challenges of supporting clients who may not pursue care due to the stigma of being a PLWHA, limited financial resources, or dealing with addiction or other issues that may complicate treatment or limit the client's ability to adhere to HIV treatment. There is no other organization in Middle Tennessee that can replicate the exceptional medical care that the VCCC provides to its clients.

An overview of VCCC's history of serving PLWHA since 1994 is provided in the graph below:



VCCC welcomes MPHD representatives to visit its facility at any time.

II. Organization Capacity:

1. Provide copies of the following:

- Resume and job description of proposed Finance Manager
- Organizational chart for your agency; chart must clearly include the program components funded by Part A/MAI.
- Copies of most recent State Licensure or Accreditations for relevant services.
- Articles of Incorporation.
- Documentation of 501(c)3 designation
- Current State of Tennessee Charitable Solicitations Letter.
- System for Award Management (SAM) exclusion report

2. Describe agency's experience in administering federal, state and/or local government funds. Include funding source(s) and number of years administering those funds. Provide information for the following:

Vanderbilt University Medical Center
Vanderbilt Comprehensive Care Clinic

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Organization and Team Qualifications

- Agency restrictions from receiving federal funds or placed on restrictive measures in the last five years (e.g., increased reporting, increased monitoring visits), please explain.
 - Corrective action plan(s) in the last three years from any funding source, please describe (include the name of the funder, overview of issues identified and the current status of addressing the identified issues and/or recommendations).
 - Audit finding(s) in the last three years. Please describe an overview of issues identified and the current status of addressing the identified issues.
 - If Contractor(s) is currently a Ryan White Part A provider, an administrative review will be conducted of the previous year's spending of grant funds and will be included as part of the score. If Contractor(s) is not a current Ryan White Part A provider, Contractor(s) must provide a letter of reference from a funder to include a description of Contractor's performance in spending allocated grant funds. This letter will be included as part of the score.
 - Submit copies of most recent A-122 Audit (for the last reporting year) conducted by an independent certified public accountant or 990 form, if not required by federal regulations to complete an A-122 Audit.
3. Describe agency's current system for collecting data on client demographics, service utilization and performance data. Include all software used to collect this data, staff resources for data collection and hardware resources.
 4. Describe agency's system for managing fiscal and accounting responsibilities. Address the following:
 - Define who oversees this area, what staff is responsible for these activities.
 - Identify what software is used to manage financial information.
 - Describe the accounting system that is in place; and
 - Describe the internal systems that are used to monitor grant expenditures and track, spend, and report program income generated by a federal award.
 5. Describe agency's process for completing program reports in a timely and accurate manner. Include descriptions of how responsibility for reporting responsibilities are assigned to staff, how reports are reviewed for accuracy and who assures reports are completed on time.

Requested Documentation

The resume and job description of Adrian McBride, VCCC's Program Manager for Ryan White Parts A-D grants, are included as Attachment 02: Resume and Job Description of Proposed Finance Manager.

The organizational chart for the VCCC, including program components funded by Ryan White Part A, is included as Attachment 10 Organizational Chart with Ryan White Part A Program Components.

A copy of VUMC's accreditation as a Primary Care Home from the Joint Commission and other VUMC accreditations are included as Attachment 03 State Licensures or Accreditations

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Organization and Team Qualifications

A copy of VUMC's Articles of Incorporation is included as Attachment 04 Articles of Incorporation

A copy of VUMC's 501(c)3 designation is included as attachment 05 Documentation of 501(c)3 Designation.

As a hospital, VUMC is legally exempt from the need for a State of Tennessee Charitable Solicitations Letter. A document supporting this is included as Attachment 07 State of Tennessee Charitable Solicitations Letter.

A copy of VUMC's System for Award Management (SAM) exclusion report is included as Attachment 08 System for Award Management Exclusion Report

Agency Restrictions, Corrective Actions, and Audit Findings

VUMC and the VCCC have extensive experience managing and administering federal, state, and local grant funds. In Fiscal Year 2024 (July 2023 through June 2024), VUMC received 2,371 new grants and contract awards and received over \$750 million in federal funding. These grants and contracts are for assorted services, including research, clinical, and professional services, leases, training, and licensing agreements.

The VCCC is a current recipient of Ryan White Parts A, B, C, D, and F funds. The VCCC has administered Ryan White Part B funds since the clinic's inception in 1994, Part C funds were first awarded to the clinic in 1996, and Part D in 1999. The clinic has received Ryan White Part A funds since 2007. Dr. Sean Kelly, VCCC's Medical Director, is the Principal Investigator (PI) for Ryan White Parts A-D grants.

The PI of Ryan White Part F, which supports the Southeast AIDS Education Training Center (SE AETC) and was first awarded in 2015, is Dr. Cody Chastain.

Neither VUMC nor the VCCC have been restricted from receiving federal funds or placed on restrictive measures.

In the last three years, there have been two audit findings from the VCCC's Ryan White Part B funder that required a corrective action plan. The audit findings, root causes, corrective actions, and status are documented below:

Finding One: The grantee (VCCC) did not file monthly invoices in a timely manner.

Root Cause: There was a significant delay between the awarding of the contract to VCCC for Ryan White Part B services and formal execution of the contract by both parties. The delay was due to legal negotiations, but there was limited communication between parties which contributed to confusion about when invoices should have begun being submitted to the funder.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Organization and Team Qualifications

Corrective Action: VCCC began invoicing for services upon the execution of the contract. In addition, VCCC hired a program manager to manage the day-to-day financial aspect of its suite of Ryan White A-D grants, including ongoing communication with funders.

Current Status: Resolved.

Finding Two: The VCCC did not provide a depression screening tool to clients visiting the clinic.

Root Cause: Depression screening was accruing but was not being tracked within the VCCC's medical record system.

Corrective Action: Depression screening (PHQ9) was added to the nursing screening process for all clients at each visit.

Current Status: Resolved.

VCCC is a current Ryan White Part A provider. MPHD conducted a fiscal audit of VCCC's systems in October 2024, and no findings were reported then. An audit of medical records was conducted in December of 2024 and no findings were reported.

VUMC's most recent financial audit (through FY2023) is included as Attachment 06: A-122 Audit.

Agency's Current System for Collecting Data

VUMC uses multiple information systems to manage health records and administer health care services. The primary system, Epic Enterprise, manages clients' clinical records, scheduling, and billing, including the costs of HIV-related care that are paid by third-party payors and by Ryan White. Additional databases that VCCC staff use to collect, monitor, and track client information include MedData Services for pharmacy assistance, RedCap for Pathways case management and medication adherence, referral, behavioral health consultations, and other medical case management services.

To create the Ryan White mandated reports, such as Ryan White HIV/AIDS Program Services Report (RSR) that is submitted to HRSA annually, the VCCC's database administrator works with staff at Vanderbilt Informatics to identify required data points, download them from multiple institution systems, and convert the data to flat files. The data is then imported into Microsoft Access or Microsoft Excel, cleaned, and prepared for RSR reporting. In addition to the RSR, the database administrator will pull data from these systems to share with the MPHD and TDOH (VCCC's Ryan White Parts A and B funders, respectively) as part of VCCC's quarterly Provider Data Export. These funders upload this client-level data into CAREWares using a unique identifier.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Organization and Team Qualifications

Using MS SQL Management Studio tools, the database administrator can pull clinical data, monthly service data, demographic data, and epidemiological data for sharing with internal and external partners. Data shared with HRSA is anonymized before sharing, and VUMC staff are trained on and adhere to stringent client privacy guidelines. Staff who violate client privacy face disciplinary action up to and including termination as well as any additional legal repercussions. Client privacy policies are developed by VUMC and shared across the entity. A copy of these policies is available upon request.

Data required for Quality Improvements projects are also collected in the above-mentioned systems and databases, some of which were created exclusively for VCCC use. The database administrator spends considerable time finding and identifying the correct fields in these overlapping systems. Data extracted from various sources is matched, normalized, cleaned, and then missing data are completed by chart review. This process takes place in MS Access. VCCC has a consistent record of submitting RSR and other funder-requested reports in time and correctly. The RSR data dictionary is used to prepare the data for RSR reporting.

In the coming months, the VCCC will be transitioning into using CAREWares to track client data. The VCCC will work collaboratively with the MPHD to determine a realistic timeline for full implementation of CAREWares.

Data on client experience is assessed using an outside vendor (Press Ganey) to ensure objectivity. Reports are generated at least monthly or as needed.

Agency System for Managing Fiscal and Accounting Responsibilities

VCCC's Program Manager is responsible for the day-to-day financial management of Ryan White grants. VUMC's financial system typically closes within 10 days (about 1 and a half weeks) of the month-end, and the Program Manager pulls a variety of internal reports to review spending. These reports include staff salary and benefits spend, spend on materials, supplies, and other direct costs, and indirect costs. In addition, VCCC providers and staff review and confirm their effort quarterly.

If errors are found, the Program Manager can adjust spending as needed. Spending changes are tracked within VUMC's accounting system, and the Program Manager completes Cost Transfer Memos or other documentation as needed for audit and record-keeping purposes.

The Program Manager works under the supervision of the Director of Medical Specialties Clinics as well as the Division Administrator for the VUMC's Department of Medicine's Infectious Disease Division. The grant's PI also provides support.

VUMC follows Generally Accepted Accounting Principles, and monthly revenue and expenditure reports and program income reports are generated by the Program Manager using data from a variety of internal VUMC resources, including the financial data stored on

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Organization and Team Qualifications

Workday – the backbone VUMC’s fiscal management system and predominate repository of VUMC’s fiscal information. The Program Manager also provides spending information to the Finance Department, who then generate monthly invoices. Data for these reports are obtained through VUMC’s Workday system, which tracks program expenditures such as staff salary and fringe benefits, equipment and supplies, mileage reimbursement, and indirect costs among other categories. Each grant is given a unique code to track spending, and staff pull financial reports from Workday to track grant allocation, spending, and closeout.

Additional administrative tools include COEUS, an internal grant submission and tracking tool developed and managed by VUMC’s Office of Sponsored Programs, and PEER, which tracks contracts, grant agreements, Memorandum of Understanding, and other legal documents. Information from these systems is shared with Workday, as needed. For example, a budget created as part of a grant application submission provides the foundation for the budget that is created for that grant in Workday. Workday also provides other administrative tools to VUMC, including departmental budgeting and planning, purchasing, and human resources. This resource provides VCCC and VUMC with one primary repository of information to support day-to-day programs and clinic operations.

Agency’s Process for Completing Program Reports

Each year, and with each new grant contract, the Program Manager and Database Administrator develop a schedule for reporting on financial and programmatic data to the funder. The schedule describes reports required, the staff member responsible for its completion and the date the report is due to the funder or administrator. The Program Manager, in collaboration with VUMC’s finance department, is responsible for program income reports, revenue and expenditure reports, monthly financial reports, and monthly invoices. Quarterly data and export reports, monthly program reports, and any demographic or epidemiologic reports or studies are completed by the database administrator.

Staff also have a monthly check-in with VCCC and VUMC leadership where current expenditures and reporting needs are reviewed and discussed.

III. Cultural and Linguistic Competency:

The National Culturally and Linguistically Appropriate Services (CLAS) Standards are intended to advance health equity, improve quality, and help eliminate health care disparities by providing effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.

At Metro Public Health, we are committed to ensuring equitable services for and effective communication with persons whose primary language is not English, and who have limited or no ability to speak, read, write, or understand the English language. This includes communities traditionally identified as Limited English Proficient (LEP) and D/deaf or Heard

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Organization and Team Qualifications

of Hearing. In accordance with federal laws, including Section 1557 of the Patient Protection and Affordable Care Act, and Title VI of the Civil Rights Act of 1964, we will provide qualified language assistance at all points of contact at no cost to customers and their companions. This commitment aligns with Metro Public Health's mission of protecting, improving, and sustaining the health and well-being of all people in Nashville and Davidson County.

To ensure that our customers receive the necessary care and can enjoy effective communication with their medical providers, we strongly encourage our partners to respect and accommodate the customer's linguistic needs. This means offering language assistance to individuals who have limited English proficiency or other communication needs, at no cost to them, to facilitate timely access to all health care and services. Meaningful language access must come from qualified sources. Interpreting and translation services must be provided by competent, qualified individuals. Interpreter skills can be determined by administering appropriate assessments. Minors and untrained or unqualified individuals should not provide language access services (interpreting or translating). Qualified interpreters are familiar with specialized vocabulary and know to adhere to national standards of practice for interpreters in healthcare that ensure, among other things, client confidentiality.

For written communication, machine translation alone is insufficient to meet civil rights requirements. Any use of AI or machine translation must be reviewed by a qualified human interpreter when the underlying text is critical for meaningful access to an activity or program. Partners are encouraged to post public notices of nondiscrimination and include notices of availability of language and disability services in significant documents. All notices about the availability of language assistance must be provided in the top 15 languages in the state or states in which the organization operates. For example, the notice of availability must be included on applications for benefits, terminations of eligibility, consent forms, discharge papers, medical bills, and explanations of benefits.

Partners must also ensure the effectiveness of their language access procedures.

Please consider the following:

- Instructions on how employees can obtain qualified translators/interpreters.
- Explanations of how employees identify LEP individuals.
- A list of translated materials and their locations.

Cultural and Linguistic Standards Requirements:

1. Describe your agency's cultural competency capabilities as it relates to the population being served by this funding announcement.
2. Describe the agency's strategic plan, policies, and initiatives that demonstrate a commitment to providing culturally and linguistically competent health care and developing culturally and linguistically competent staff. Cultural competence means having a set of congruent behaviors, attitudes, and policies that come together in a system

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Organization and Team Qualifications

or organization or among professionals that enables effective work in cross-cultural situations.

3. It includes an understanding of integrated patterns of human behavior, including language, beliefs, norms, and values, as well as socioeconomic and political factors that may have significant impact on psychological well-being and incorporating those variables into your service delivery system. Include any innovative or successful activities your agency has undertaken in order to improve your cultural and linguistic capacity.

Agency's Cultural Competency for PLWHA

As a provider of health care to a stigmatized population, VCCC is acutely aware of the importance of overcoming barriers to care, including cultural and linguistic barriers. VCCC incorporates cultural competence awareness in staff meetings and all staff members complete annual compliance training for non-discriminatory practices. All training completed by staff is tracked online, and VUMC may develop and push out new training to staff as needs arise. In addition, VCCC staff also participate in periodic training, including a course on “Stigma”, offered by the SE AETC. The SE AETC offers in-person and web-based trainings led by subject-matter experts throughout the Southeast region of the United States. Staff may attend these training courses to expand their personal knowledge of serving PLWHA, for continuing education credits, and to learn how other ASOs in the Southeast are reaching their clients.

As a practice, VCCC seeks to hire bi-cultural staff to deepen the organization's ability to learn and develop new insights. Furthermore, VUMC tracks the demographics and languages of its clients. VCCC providers and staff can access this information to gain a deeper understanding of the demographics served by VCCC and the language needs of its clients.

In accordance with federal law, VUMC provides interpreters to clients free of charge. VUMC interpreter services include American Sign Language interpreters, readers for clients who are visually impaired or blind, assistive listening devices, access to client materials that are compatible with assistive technology, and qualified interpreters and translated documents for clients with Limited English Proficiency.

When a Limited English Proficient client schedules an appointment, VUMC's Interpreter Services receives an automatic interpreter request. Staff can also request interpreters at the time of the appointment. At VCCC, interpreters for Spanish and Arabic may be available on-site at the time of the appointment with other languages available via telephone. If a Spanish or Arabic translator is not available on-site, staff will use the telephone or video translation services.

VCCC staff has materials that have been translated into Spanish in their office. These include the book: *100 Questions about HIV*; a handout: “Get the Support You Need”; and informational documents about the Ryan White program. The handout and Ryan White

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Organization and Team Qualifications

documents are also available in a second language and may be shared electronically or printed. If other languages are needed, VCCC staff will reach out to translation services.

Finally, VCCC employs staff who speak Spanish, Nigerian, and Swahili. While these staff members use VUMC's translation services for translating medical language, having a provider or staff member who speaks a client's native language helps reduce language-driven barriers to care.

Agency's Strategic Plan, Policies, and Initiatives for Culturally and Linguistically Competent Health Care

The growth and refinement of the Pathways Program is an example of the VCCC's culturally and linguistically competent approach to health care. The VCCC has embraced the evidence-based principle that undetectable is untransmittable and that guideline has informed how the Pathways Program has developed over time to improve client care.

Initially, the Pathways Program was structured under the clinic's Clinical Pharmacy Services to help address the needs of the clinic's most difficult-to-treat clients. These would be clients with significant barriers to care, such as a lack of financial resources, limited or no transportation, coping with psychiatric issues that made treatment adherence inconsistent, or were managing a substance-use disorder that made medication adherence not a realistic goal.

After seeing the success of the Pathways Program within that client population, the VCCC strategized on how to make the Pathways Program an integral part of clinic operations for all clients. To do this, the clinic first switched its approach to the Pathways Program. Instead of the Pathways Program being an element of the VCCC's Clinical Pharmacy Services, the VCCC's Clinical Pharmacy Services became an element of the Pathways Program. This ensured that medication adherence, not just medication access, was the primary focus of the program. Second, the Pathways Program formalized its approach to care to better address the needs of all new clients. Instead of being connected as a last resort, the Pathways Program became the second department that new clients connected with after social work. Furthermore, Pathways staff added social determinants of health assessment, an intensive case management score, and incorporated professional observations to better identify where and to what extent clients needed support from the Pathways Program. By including professional observation, Pathways staff is better able to tailor the Pathways Program to the cultural or linguistic needs of the client. For example, a client may come from a community where HIV is stigmatized and Pathways staff can use best practices, such as coded text reminders from a personal cellphone number rather than VUMC's automated system, inconspicuous pill holders, or the use of quarterly medical interventions in a client's ART rather than a daily pill, to reduce the risk of others discovering the client's HIV status.

After reviewing data and internal results, the Pathways Program determined that there were four levels of intervention best suited for the clinic's clients: one, being the lowest level of

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Organization and Team Qualifications

intervention and four being the most. All new clients are assigned to at least one of these levels, thereby ensuring they have a PNCM as a resource as they adjust to care. Clients who adjust and manage their care well are removed from the Pathways Program – though they can contact their PNCM at any time if issues arise – and clients who show difficulty adhering to care are moved up and down between the levels. Clients may also be moved to a different PNCM, as needed. In this way, both PNCM and the client take leadership in care and develop a trusting relationship that acknowledges and addresses cultural or linguistic barriers. VCCC surpassed a viral suppression rate of 90% for the first time in CY2023 and believes that the growth of the Pathways Program was a vital factor in this achievement.

Innovative or Successful Activities to Improve Cultural and Linguistic Capacity

The VCCC continuously evaluates client service data to improve clinic operations and ensure that staff are providing culturally and linguistically competent health care. A recent example of this is the full-time employment of two behavioral health consultants at the VCCC and the use of another staff member to provide 0.5 FTE behavioral health care.

The VCCC developed these new roles to better address the immediate needs of the clinic's clients. While the clinic tries to make its processes as seamless as possible, a visit to the VCCC can be stressful and behavioral health issues may arise. In the past, the client would have to schedule a follow-up visit with a behavioral health specialist and return to the clinic for care. By expanding the clinic's staffing capacity, the VCCC can now see clients experiencing a behavioral health issue at the time of their visit. This enables clients to confront cultural stigma and address worries as they arise, process difficult emotions, and develop coping strategies in partnership with expert staff. If needed, a medical translator is always available to VCCC clients and staff.

For concerns that arise outside of clinic hours, the VCCC behavioral health staff manage a triage phone system and reach out to clients who contact the clinic as soon as possible during clinic hours. Furthermore, clients who are dealing with an immediate psychiatric crisis may either call VUMC's hotline at any time or receive walk-in care at VUMC's adult psychiatric hospital during walk-in hours (8 AM to 11 PM M-F; 8 AM to 7 PM Sa-Su). Due to VUMC's electronic medical record system, notes from VCCC behavioral health staff are available to VUMC psychiatric staff and vice versa.

IV Collaboration

1. Describe a plan for creating a new or improving an existing network to improve collaboration with HIV agencies that will link PLWHAs to HIV testing and HIV medical care and support services. If applicable, identify any collaborating organizations that will assist the applicant through HIV testing and linkage to HIV medical care and services.
2. Contractor(s) must demonstrate their commitment to work with or collaborate with organizations representing the HIV/AIDS community through a signed and dated letter of support or memoranda of agreement or understanding. The letter must specify example activities that each entity provides that will help connect high risk clients to HIV testing and services.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Organization and Team Qualifications

Creating or Improving an Existing Network to Improve Collaboration with HIV Agencies

Dr. Sean Kelly is a member of the Metro TDH Standard of Care Committee, which developed and reviews standards for all aspects of HIV care provision and governs how services are delivered to achieve positive health outcomes.

Dr. Kelly is also a member of the AIDS Centers of Excellence Advisory Committee, which advises the TN Department of Health in the designation of AIDS Centers of Excellence across the state, provide quality assurance monitoring for centers across the state, and establishes and reviews policies for centers across the state.

A primary concern of the VCCC and other stakeholders is re-engaging clients who have been lost to care – that is, clients who have been diagnosed and may have begun treatment but have failed to attend follow-up appointments or respond to outreach. To address this population, VCCC has a staff member whose role is centered on reaching out to and re-engaging former clients in care. VCCC defines an individual as lost-to-care if a VCCC client has not attended an appointment at the VCCC for over a year and has not informed the VCCC that they have moved or transferred their care to another provider. Strategies may include phone calls, text messages, reminders about upcoming appointments, and contact if a client lost-to-care makes and then misses an appointment.

Due to the importance of ending HIV transmission, it is the policy of the VCCC continuously follow-up and encourage PLWHA meet with their provider, social worker, and PNCM at the VCCC, even if they have been lost to care or have a history of no-shows for scheduled appointments. VCCC providers and staff understand that clients may face barriers to care such as lack of financial resources, behavioral health issues, social stigma, or substance use disorder. VCCC understands these difficulties may contribute to clients not adhering to treatment and collaborates with clients to address issues that may be a barrier to care so that they can begin or resume treatment. The VCCC welcomes PLWHA back into care regardless of their past appointment history.

Finally, VCCC understands its role in the TGA and Middle Tennessee linkage-to-care landscape as an entity that provides medical care to PLWHA. Other ASOs in TGA host rapid testing either at their facilities or at community events. Individuals who test positive are then referred to VCCC for treatment. VCCC limits its testing services to individuals needing confirmatory testing or to partners of current VCCC clients. This approach allows other ASOs to prioritize HIV/AIDS testing and prevention services while the VCCC focuses on medical treatment.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI
Reference Projects

B. Reference Projects (10 Points) Service History & References:

1. If your agency currently provides this service(s) to the HIV/AIDS client population, describe the number of years you have provided this service and the funder of the service. Please provide a reference name and phone number.
2. If your agency does not currently provide service(s) to the HIV/AIDS client population, explain any related experience that would demonstrate the agency's competency in providing services to this population. Please provide a reference name and phone number.
3. Describe any related experience that would demonstrate your agency's competency in providing HIV medical or support services to this population. Please provide a reference name and phone number.

Metro reserves the right to check any and/or all contacts for projects, including but not limited to internet each and media reviews, submitted but is not obligated to do so as part of the evaluation.

Metro reserves the right to check any and/or all contacts for projects, including but not limited to internet each and media reviews, submitted but is not obligated to do so as part of the evaluation.

The file is limited to 5 pages and should in PDF format titled "Reference Projects."

Reference Projects

The VCCC has been providing medical care to PLWHA for over 30 years. The clinic was founded in 1994 as a key recommendation by the Mayor's Commission on AIDS as a single site for comprehensive HIV and AIDS care and became the largest HIV primary care clinic in Tennessee. In CY2024, the VCCC provided medical care to 3,811 clients and has served over 10,000 clients since its founding.

The VCCC became a Ryan White Part A grantee in 2007 and the VCCC is pleased to submit this proposal to continue our partnership with the MPHD. This federal funding is distributed from the Health Resources and Services Administration to the MPHD. Currently, VCCC's Ryan White Part A grant funds behavioral health consultants and nurse case managers who support clients with medication adherence, safety, prescription assistance, and prior authorizations. Ryan White Part A funding also provides for direct medical services for PLWHA within the TGA from whom no other funding source is available.

A reference for Ryan White Part A is Beverly Glaze-Johnson, MSP, LBSW, BSW. Ryan White Part A Director, Metro Public Health Department. (615) 485-5574, Beverly.Glaze-Johnson@nashville.gov.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Reference Projects

The VCCC became a Ryan White Part B grantee in 2008. This federal funding is distributed to the State of Tennessee from HRSA, supports the VCCC in its role as an HIV Center of Excellence, and allows VCCC providers to give care at health departments in Springfield, Columbia, and Cookeville, TN. This funding also supports staff who provide medical case management and screen clients for Ryan White eligibility, provide referral services, support client retention and engagement, provide pharmacy services, and support clinical quality management processes.

A reference for Ryan White Part B is Robertson Nash, PhD, ACNP-BC. HIV Program Director, Tennessee Department of Health. (615) 532-9254, Robertson.nash@tn.gov.

The VCCC became a Ryan White Part C grantee in 1998 and a Ryan White Part D grantee in 1999. This federal funding through the HRSA and continues to this day. It funds a mix of client care services including behavioral health services, adolescent services, outpatient obstetric services, and medication adherence.

VCCC's Project Officer for Ryan White Parts C and D is Christie Slay, MPA, MAEd, CHES. Public Health Analyst and Project Officer, Health Resources and Services Administration. She began as VCCC's Project Officer in February 2025. She can be reached at (301) 443-0504 or cslay@hrsa.gov.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI
Project Approach and Process

C. Project Approach and Process (30 Points)

I. Staffing:

Present in detail your organization's staffing plan and provide a justification for the plan that includes education and experience qualifications and rationale for the amount of time/hours per month being requested for each proposed staff position.

If applicable, describe in detail the roles and responsibilities of any consultants and/or subcontractors will be used to carry out aspects of the proposed project.

Organization Staffing Plan

VCCC providers and staff are listed below. For providers, VCCC proposes that MPHD reimburse the VCCC for outpatient services provided to uninsured PLWHA who are eligible for Ryan White Part A through a mutually agreed upon fee schedule. The fee schedule will include the CPT code, the procedure code, and the reimbursement rate for the procedure. The cost of the procedures will be determined by VCCC with the understanding that fees will set to cover costs and program income will not be generated through the fee schedule.

The salary, benefits, and IDC (10%) of the Pathways Nurse Case Managers (PNCM) listed below will be reimbursed to VCCC via an agreed per-encounter charge. The per-encounter charge will be based on the effort required for the PNCM to serve the Ryan White Part A population at the VCCC divided by the estimated number of encounters during the grant year. Each month, VCCC will review internal data to determine the total number of PNCM encounters with Ryan White Part A clients and multiple that by the per-encounter charge. For reference, in GY2024-2025, the per encounter charge for the PNCM is \$37.63 and the per-encounter charge will be included in the fee schedule.

The effort for the Behavioral Health Consultants, Social Work Medical Case Management, and Referral services will be based on the percentage of Ryan White Part A-eligible clients served at the VCCC, which is currently 50%.

Fee-Schedule Based-Staff (Outpatient/Ambulatory Care)

Providers

- S. Bailin, MD. Assistant Professor, provides diagnoses and treatment of disease. He has been a physician with the VCCC since 2021.
- J. Castilho, MD, Assistant Professor, provides diagnoses and treatment of disease. She has been a physician at VCCC since 2012.
- C. Chastain, MD, Assistant Professor, provides diagnoses and treatment of disease. He has been a physician with the VCCC since 2014. Dr. Chastain is currently the PI for the VCCC's Ryan White Part F grant at the SE AETC.
- S. Dunaway, MD., Associate Professor, provides diagnoses and treatment of disease. She has been a physician at VCCC since 2023.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Project Approach and Process

- K. Eguakun, NP, Nurse Practitioner, provides diagnoses and treatment of disease and manages the VCCC's anoscopy clinic. He has been an NP at VCCC since 2010.
- D. Hughes, NP, Nurse Practitioner, provides diagnoses and treatment of disease and oversees the development and maintenance of the VCCC's Women, Infant, Children, and Youth policies and protocols. She has been an NP at the VCCC since 2018.
- S. Kelly, MD, Associate Professor and Medical Director of the VCCC, provides diagnoses and treatment of disease. He has been a physician with the VCCC since 2016 and serves as the PI on the VCCC's Ryan White A-D grants.
- A. Person, MD, FIDSA, Professor of Medicine and Director of Interprofessional Education at the SE AETC, provides diagnoses and treatment of disease. She has been a physician with the VCCC since 2010.
- A. Pettit, MD, MPH, Assistant Professor, provides diagnoses and treatment of disease. She has been a physician with the VCCC since 2013.
- C. Smith, NP, Nurse Practitioner, provides diagnoses and treatment of disease. She has been an NP with the VCCC since 2021.
- C. Terndrup, MD., Associate Professor, provides diagnoses and treatment of disease. He has been with the VCCC since 2023.
- K. Wagner, MD, PhD, Associate Professor, provides diagnoses and treatment of disease. She has been with the VCCC since 2023.
- C. Wanjalla, MD, PhD, Assistant Professor, provides diagnoses and treatment of disease. She has been with the VCCC since 2017.
- K. White, MD, PhD, Associate Professor, provides diagnoses and treatment of substance use disorders. She has been with the VCCC since 2022.

Fellows

- E. Moore has been a fellow at VUMC since 2023.
- K. Okafor has been a fellow at VUMC since 2022.
- R. Pellegrino has been a fellow at VUMC since 2022.
- L. Pryke has been a fellow at VUMC since 2024.
- M. Uehling has been a fellow at VUMC since 2024.
- Zeoli has been a fellow at VUMC since 2024.
- M. Zou has been a fellow at VUMC since 2023.

Pharmacy

- R. Moss, PharmD, leads pharmacy services to improve adherence to treatment regimens, decrease problems associated with drug interactions, and decrease rates of adverse and potential adverse medication events. He has been with the VCCC since 2009.
- A. Muscarella, PharmD, works with clients to improve adherence to treatment regimens, provide medication management and counseling, support comprehensive medication review, therapy selection, and medication monitoring. She is involved in several quality improvement projects at the clinic to support clinical and pharmacy services. She has been with the VCCC since 2024.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Project Approach and Process

Nursing

- K. Bradford, LPN Lead, takes clients to see providers and administers injections. She has been with the VCCC since 2019.
- A. Thomas, RN, provides triage services, takes clients to see providers, and administers injections. He has been with the VCCC since 2022.
- K. Williams, RN and Assistant Manager of Patient Care Services, oversees nursing and front desk staff. She has been with the VCCC since 2024.
- M. Anderson, RN, provides triage services, takes clients to see providers, administers injections, and administers colposcopies. She has been with the VCCC since 2024.
- R. Morton, RN, provides triage services, takes clients to see providers, administers injections, and administers anal cancer screenings. He has been with the VCCC since 2023.

Pathways Nurse Case Managers (PNCM)

- A. Fisher, RN, case manager, works with clients to improve adherence to treatment regimens, decrease problems associated with drug interactions, and decrease rates of adverse and potential adverse medication events. She has been with the VCCC since 2021.
- A. Jackson, RN, case manager, works with clients to improve adherence to treatment regimens, decrease problems associated with drug interactions, and decrease rates of adverse and potential adverse medication events. She has been with the VCCC since 2018.
- L. Reese, RN, case manager, works with clients to improve adherence to treatment regimens, decrease problems associated with drug interactions, and decrease rates of adverse and potential adverse medication events. She has been with VCCC since 2013.
- K. Richie, RN, case manager, works with clients to improve adherence to treatment regimens, decrease problems associated with drug interactions, and decrease rates of adverse and potential adverse medication events. She has been with the VCCC since 2023.

Direct Grant-Funded Staff

Medical Case Management (Social Workers)

- A. Hall, LCSW, provides multiple supports to PLWHA at the VCCC, including intake counseling to newly diagnosed PLWHA, initial and ongoing eligibility assessments for PLWHA, billing support, and connection of PLWHA to non-VCCC supportive resources. She has been with the VCCC since 2016. 50% of her effort will be charged to Ryan White Part A medical case management, as determined by caseload.
- C. James, LCSW, oversees social work team and provides multiple supports to PLWHA at the VCCC, including intake counseling to newly diagnosed PLWHA, initial and ongoing eligibility assessments for PLWHA, billing support, and connection of PLWHA to non-VCCC supportive resources. He has been with the VCCC since 2013.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Project Approach and Process

25% of his effort will be charged to Ryan White Part A medical case management, as determined by caseload.

- J. Ruble, LCSW, provides multiple supports to PLWHA at the VCCC, including intake counseling to newly diagnosed PLWHA, initial and ongoing eligibility assessments for PLWHA, billing support, and connection of PLWHA to non-VCCC supportive resources. She has been with the VCCC since 2021. 50% of her effort will be charged to Ryan White Part A medical case management, as determined by caseload.
- D. Smith, LMSW, provides multiple supports to PLWHA at the VCCC, including intake counseling to newly diagnosed PLWHA, initial and ongoing eligibility assessments for PLWHA, billing support, and connection of PLWHA to non-VCCC supportive resources. She has been with the VCCC since 2023. 50% of her effort will be charged to Ryan White Part A medical case management, as determined by caseload.
- L. Taylor, LMSW, provides multiple supports to PLWHA at the VCCC, including intake counseling to newly diagnosed PLWHA, initial and ongoing eligibility assessments for PLWHA, billing support, and connection of PLWHA to non-VCCC supportive resources. She has been with the VCCC since 2023. 50% of her effort will be charged to Ryan White Part A medical case management, as determined by caseload.

Mental Health (Behavioral Health Consultants)

- C. James, LCSW, will provide individual therapy and targeted brief behavioral health interventions. He has been with the VCCC since 2013. 25% of his effort will be charged to Ryan White Part A behavioral health, as determined by caseload.
- L. Johnson, LMSW, will provide individual therapy and targeted brief behavioral health interventions. She has been with the VCCC since 2023. 50% of her effort will be charged to Ryan White Part A behavioral health, as determined by caseload.
- S. Shefner, LMSW, will provide individual therapy and targeted brief behavioral health interventions. She has been with the VCCC 2022. 50% of her effort will be charged to Ryan White Part A behavioral health, as determined by caseload.

Referral Services (Patient Pharmacy Assistance Coordinator)

- L. Taylor, LPN, patient pharmacy assistance coordinator, assists clients applying for and receiving free medications through national pharmacy assistance programs and completes prior authorizations. She has been with the VCCC since 2000. 50% of her effort will be charged to Ryan White Part A referral, as determined by caseload.

VCCC is not using any consultants or subcontractors to carry out aspects of the proposed project.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI
Project Approach and Process

II. Overview of Population:

Describe in detail the HIV/AIDS population in Davidson County. Describe in the detail the issues that interfere with identifying, engaging, and retaining PLWHAs in routine HIV testing and HIV services. Describe in detail:

- 1) The number of persons you plan to serve with the funding.
- 2) The number of units of service you plan to provide by type of intervention (e.g., number of face-to-face contacts with clients and amount of time each client will be seen each year, number of educational sessions provided, number of contacts with gatekeepers); and
- 3) the average amount of service a client is expected to receive each year (e.g., 2 face to face each year) and the amount of time that will be spent with gatekeepers (e.g., 3 hours/gatekeeper/year).

HIV/AIDS in Davidson County

Data below details the HIV/AIDS population in Nashville and Davidson County. As is evident from these tables, this population represents a diverse group of PLWHA with unique challenges and obstacles to engagement in care. Major challenges that VCCC staff have identified include transportation, housing, behavioral health co-morbidities, and substance use. At the VCCC, 60% of clients are at or below 200% of the federal poverty levels, 50% have a history of substance use, 50% have a history of behavioral health issues, and 10% have unstable or threatened housing.

Nashville and Davidson County 2022 HIV Surveillance Data¹

	Tennessee ² # (Rate per 100,000))	Nashville/Davidson County # (Rate per 100,000)
Newly Diagnosed Clients	861 (12.2)	112 (N/A)
Living with HIV	20,830 (295.4)	4,332 (N/A)
Demographic Breakdown for Nashville and Davidson County in 2022		
	Newly Diagnosed ³ # (Rate per 100,000)	Living with HIV ⁴ # (Rate per 100,000)
Gender		
Cisgender Male	92 (26.9)	3457 (1010.6)
Cisgender Female	14 (3.8)	791 (216.1)
Transgender Person	6 (N/A)	84
Age		
<15	0 (0.0)	5 (4.2)
15-24	23 (25.1)	110 (120.0)

¹ Tennessee Department of Health, HIV Epidemiology and Surveillance Program. Tennessee HIV Epidemiological Profile, 2022. Nashville, TN: Tennessee Department of Health; May 2024.

² Ibid. Pg. 18

³ Ibid. Pg. 116

⁴ Ibid. Pg. 118

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI
Project Approach and Process

25-34	55 (38.3)	836 (581.7)
35-44	18 (17.5)	890 (864.3)
45-54	12 (15.3)	954 (1214.5)
>=55	4 (2.3)	1537 (893.2)
Transmission Risk		
Cisgender Male		
MMS ⁵	67 (N/A)	2557 (N/A)
IDU ⁶	5 (N/A)	183 (N/A)
MMS & IDU	1 (N/A)	145 (N/A)
HSC ⁷	16 (N/A)	253 (N/A)
PE ⁸	0 (N/A)	14 (N/A)
Other	0 (N/A)	5 (N/A)
Unknown	3 (N/A)	300 (N/A)
Cisgender Female		
HSC	11 (N/A)	548 (N/A)
IDU	2 (N/A)	126 (N/A)
PE	0 (N/A)	9 (N/A)
Other	0 (N/A)	5 (N/A)
Unknown	1 (N/A)	103 (N/A)
Transgender Person		
ASC ⁹	6 (N/A)	74 (N/A)
IDU	0 (N/A)	1 (N/A)
ASC & IDU	0 (N/A)	2 (N/A)
PE	0 (N/A)	0 (N/A)
Other	0 (N/A)	0 (N/A)
Unknown	0 (N/A)	7 (N/A)

If awarded the funding requested, VCCC providers plan to serve a projected 400 uninsured clients who live within the TGA with direct medical services, between two and three times per year and 1,800 clients with ancillary services including behavioral health consultations, coordination with the Pathways Program, and social worker-led medical case management. Client interactions with behavioral health, the Pathways Program, and social workers is based on client need, but VCCC estimates that each client should see at least one of those clinic staff between two and three times per year. Visits with gatekeepers may be face-to-face or non-face-to-face, depending on factors such purpose of visit, client need, and access to transportation.

⁵ Male-to-Male Sexual Contact

⁶ Injection Drug Use

⁷ Heterosexual Contact

⁸ Perinatal Exposure

⁹ Any Sexual Contact

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Project Approach and Process

Medical Case Management (Social Workers)

The social work team works collaboratively to provide medical case management that ensures clients adjust to living with HIV, are assessed for eligibility for the Ryan White program, and are aware of non-VUMC supportive organizations and resources. Clients may reach out to their social worker at any time with questions, concerns, or for additional resources. In CY2024, VCCC social workers reported 6,696 encounters (9,689 service units) with Ryan White Part A-eligible clients. Of these encounters, 1,266 were face-to-face and 5,430 were non-face-to-face.

Mental Health (Behavioral Health Consultants)

The Behavioral Health team engages with clients needing behavioral health services as part of their scope of care. The Behavioral Health team performs general behavioral health assessments, crises assessment and counseling, coordinates client resources, and provides supportive therapy. In CY2024, the Behavioral Health team recorded meetings with Ryan White Part A-eligible clients 230 times; of these, 190 meetings were face-to-face and 40 were non-face-to-face. In total, they performed 385 units of service for Ryan White Part A-eligible clients, with each unit being 15 minutes.

Outpatient and Ambulatory Care (Direct Medical Services and PNCM)

VCCC Providers provides direct medical care to uninsured, Ryan White Part A-eligible clients in the TGA. Care for PLWHA includes labs, non-labs (such as x-ray and imaging), specialty care, and care from VCCC providers. From November 2023 and October 2024, the VCCC provided 4,727 technical (labs and non-labs) procedures, 360 specialty procedures, and 1,885 procedures from a VCCC medical provider to approximately 400 uninsured, Ryan White Part A-eligible clients. Due to the importance of care and how insurance status may change over the course of a year, VCCC staff work collaboratively to ensure a client's most-recent insurance information is in VUMC's system. While telehealth is available, direct medical care provided through Ryan White Part A funding typically occurs face-to-face.

The Pathways team works collaboratively to provide medical case management that ensures clients obtain the appropriate medication for their care and adhere to their medication treatment schedule. Clients may contact their PNCM at any time with questions or concerns about their treatment plan. In CY2024, PNCMs reported 7,481 encounters with Ryan White Part A-eligible clients for 10,465 service units. Of these encounters, 955 were face-to-face and 6,526 were non-face-to-face.

Referral Services

In addition, VCCC's prior authorization and patience assistance coordinator reported 1,005 encounters (1,856 service units) to assist Ryan White Part A-eligible clients in obtaining their medication. Of these encounters, 999 were non-face-to-face.

VCCC will ensure that Ryan White Part A is the payer of last resort for services provided through this grant. More detailed metrics are outlined in the Workplan Section.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Project Approach and Process

III. Implementation Plan:

The importance of improving progress along the HIV care continuum is supported by the use of scientific research that leads to the identification of best practices and evidence-based practices. The use of best practices/evidenced informed models is preferred for all services and as applicable/available.

Describe in detail any evidence bases or best practice models you will use to provide the service. Include a reference to the model name and source of the best practice (e.g., "Healthy Living Project," CDC Evidence-Based Intervention-EBI).

<https://www.cdc.gov/hiv/research/interventionresearch/compendium/index.html>

Ideally, interventions will be based upon proven outreach and engagement models; and/or adaptations of proven models; and /or novel models of outreach and engagement in care, particularly developed for the HIV/AIDs population.

Implementation Plan and Evidence-Based Models of Service

All services provided at the VCCC are developed following nationally accepted standards as described in the U.S. Centers for Disease Control and Prevention's HIV Compendium of Best Practices¹⁰ and the U.S. Department of Health and Human Services Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents with HIV.¹¹ The laboratory evaluation used for intake and monitoring clients at the VCCC is based on the US Department of Health and Human Services Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents with HIV.

Clients are referred to the VCCC from various testing sites including CBOs, Health Department clinics, and private practices. For new clients, it is essential that VCCC's providers and staff work collaboratively to engage and retain clients in care. Once the client is seen by the provider, the client is followed closely for the first six months by the assigned PNCM and social worker. These staff members help the client address any issues that may be (or become) a barrier to care. The client's follow-up is also closely monitored by staff who will actively reach out to the client to reschedule missed appointments, help coordinate transportation or address other needs. A Linkage and Retention Nurse reaches out directly to clients who are lost-to-care (have not seen a VCCC provider for more than 12 months) to help get those clients return to treatments.

The client's success in treating HIV and attaining virologic control (a critical step in the HIV care continuum) is facilitated by an interdisciplinary care team approach. New clients are assessed to determine if Rapid ART is appropriate and all clients starting, stopping, or changing antiretrovirals are presented in a case conference setting (ART conference) which involves providers, behavioral health providers, social worker medical case managers, and members of the Pathways team. The treatment recommendations are based on the

¹⁰ <https://www.cdc.gov/hivpartners/php/compendium/index.html>

¹¹ <https://clinicalinfo.hiv.gov/en/guidelines/hiv-clinical-guidelines-adult-and-adolescent-arv/whats-new>

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Project Approach and Process

virologic, immunologic and co-morbidities status of the client and social factors and client preferences. This recommendation is then presented to the client by the Pathways team, who send the prescription to the client's preferred pharmacy, manage any prior authorizations or formulary compliance issues, and follow-up with the client during their first few weeks of taking the new medication to quickly identify and address any ADEs or pADEs. The Pathways team is also consulted, as needed, by clinic staff to address issues such as pharmacy access, drug interactions, and formulary changes. The Pathways team is also consulted as needed by clinic staff to deal with issues regarding pharmacy access, drug interactions, and formulary changes. This success of this evidence-based approach to care is reflected in the VCCC's HIV viral load suppression, which surpassed 90% for the first time during CY2023. Preliminary data indicate that the viral load suppression rate remained above 90% during CY2024 as well.

IV. Best Practices:

Provide a clear and succinct description of the proposed project to implement an intervention model designed to create access to HIV testing, improve timely entry, engagement, and retention in quality HIV medical care for persons living with HIV infection.

Describe the strategies you will use to identify and engage with key stakeholders recognized and trusted by the HIV/AIDS community; include the names of specific people and entities.

Describe the components of your intervention model and its specific strategies that will:

- a) Increase awareness of HIV disease, with a focus on reaching persons at high risk for becoming infected with HIV disease.
- b) Identification of high-risk persons who need but do not access regular HIV tests and how you will link those persons to HIV testing agencies; and
- c) Identification of persons who are HIV positive but have never or who have dropped out of HIV medical care and services and how you will facilitate linking those persons with needed HIV services and care.

Proposed interventions must address personal, financial, sociocultural, and structural barriers – especially stigma – that affect PLWHAs access to HIV testing and retention in HIV medical care and services. Define specific barriers that may be encountered by the population being served and discuss how your proposed interventions will positively address each of these barriers.

Addressing Barriers to Care

The VCCC serves as a clinical resource for people diagnosed with HIV infection. The VCCC works collaboratively with CBOs that serve PLWHA, including Nashville Cares, Street Works, Neighborhood Health, the First Response Center, MPHD, and other county health departments within the TGA, to increase awareness of HIV prevalence, identify high-risk individuals, and identify PLWHA who may not have sought or have dropped out of care.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Project Approach and Process

To avoid duplicating services offered by CBOs, VCCC does not offer routine screening or testing for HIV; instead, HIV testing is limited to confirmatory testing or the testing of partners of current VCCC clients. VCCC's testing and screening protocols are based on national standards and if a person tests positive for HIV, that person is offered immediate crisis counseling and begins the intake process to become a VCCC client.

A critical challenge to the VCCC is the retention of clients who have not followed up or have difficulty adhering to structured care. A common cause of this difficulty adhering to care are lack of financial resources, lack of information about and social stigma surrounding HIV, untreated behavioral health issues, or substance use disorders. To overcome these issues, VCCC staff employ multiple resources, strategies, and tools. To address financial need, VCCC staff help clients maximize their eligibility for financial support services such as Ryan White programs, connect with local CBOs to find additional financial aid and address issues such as housing, and engage in private fundraising to help cover the cost of transportation and provide food on-site for clients in need. Education-wise, the VCCC provides clients with an overview of HIV upon diagnoses and has additional informational materials available on-site, including in non-English languages. Social workers and other professionals work collaboratively with clients to devise ways to address the stigma they may face in their daily life, whether that be through building independent coping strategies or developing methods to share their story and experience with family, friends, and colleagues to further reduce the cultural stigma around HIV. Behavioral Health specialists provide crises and on-going counseling services to clients in need, and the VCCC has an on-site group that meets weekly to help HIV positive individuals who suffer from a substance use disorder manage both their HIV and their addiction. Finally, the SE AETC allows VCCC clients, providers, and staff access, create, and share stigma and cultural humility training tools as well as learn from other ASOs in the Southeast.

To continue improving its viral suppression rate, the VCCC has focused on clients who were demonstrating difficulty adhering to medical treatment or were being lost to care. In the last five years, the VCCC has refined and continuously improved its Pathways Program, including the integration of objective metrics to help categorize clients based on their risk levels. The additional focus on staffing, resources, and program implementation have allowed the VCCC to expand the program from clients who were demonstrating barriers to care to all new clients at the VCCC. The issues addressed by the Pathways team may be extremely complex and demand a significant amount of time and expertise to address. Complex issues can involve drug interactions, formulary changes, co-pay changes, gaps in coverage and medication adherence. Clients may see the members of the Pathways team on the same day of their clinical appointment or may be scheduled to see them as needed. By providing additional, initial support to new clients and continuing these supports until the client demonstrates the ability to consistently adhere to treatment plans, the Pathways teams helps ensure that ADEs or pADEs are addressed early, before the client may be tempted to stop medication, shows the client how to address barriers to care, and develop good medication adherence and communication habits.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Project Approach and Process

The Pathways team also manages unique programs designed to eliminate common barriers to care. These programs receive funding and support from the Nashville community.

1. VCCC Transportation Program: VCCC has contracted with a rideshare vendor to provide free transportation to and from clinic for clients who need it. Approximately 110 rides are arranged each month.
2. VCCC Food Pantry: VCCC has an on-site food pantry in which Supplemental Nutrition Assistance Kits (SNAKS), curated by a dietician, are provided to clients who are experiencing food insecurity. Approximately 46 SNAKS are distributed each month.
3. VCCC Harm Reduction: VCCC provides on-site syringe service for those with substance use disorders, which includes provision of safe, sterile injecting supplies, naloxone, viral hepatitis testing, and linkage to the VCCC Substance Use Recovery Clinic. Funds for the syringe service program are provided by community fundraising efforts; Ryan White Part A funds do not go to support this service.

For additional support, all clients are also assigned to a social worker who serves as a medical case manager for the clients and helps coordinate access to available community resources, including Ryan White-funded services. New clients first meet with a social worker who follows the client's process through enrollment in the clinic and meeting with the client's medical provider. This process includes obtaining records from outside facilities, reviewing the client's history of care, providing HIV related education, scheduling the provider visit, accompanying the client to the lab for intake lab tests, and being the client's primary point of contact until they meet with their provider. Clients may also reach out to their social worker at any time to help address their changing circumstances and needs.

Clients new to the VCCC are scheduled for a 40-minute meeting with a VCCC provider and follow-up appointments are typically scheduled for 20 minutes. Due to the complexity of HIV care, the VCCC also allows for walk-in appointments to address immediate needs and concerns. These appointments are typically scheduled for 15 minutes, and clinic staff work diligently to ensure that walk-in clients are seen. Clients may also access VCCC providers via telehealth services, and a triage phone line is reviewed by VCCC nurses each morning and staffed during the day to provide clients with additional assistance. Routine clinical care includes initial laboratory evaluation and ongoing laboratory monitoring to assure virologic control and immunologic status.

Finally, the VCCC understands that specific client groups may be at higher risk of virologic failure. The VCCC has developed programs targeting these high-risk clients, including the Obstetrics Comprehensive Care Clinic (OC3) and the Adolescent Transition Program. The OC3 focuses on pregnant women with HIV and manages their care throughout their pregnancy by collaborating with the Pediatric Infectious Diseases and Maternal Fetal Medicine programs at VUMC. This program serves about 30 pregnant women a year and has had over 500 HIV negative babies born from HIV infected mothers. The Adolescent

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Project Approach and Process

Transition program focuses on adolescents living with HIV who are transitioning to adult-based care and is the result of a collaboration with the Pediatric Infectious Diseases and Adolescent Medicine programs at VUMC. This program provides youth under the age of 25 with a soft entry into the VCCC, including personalized facility tours and open communication as the client's care is transitioned from their adolescent provider to their VCCC provider. In CY2023, 5 clients transitioned from adolescent to adult care at the VCCC.

As a result of these efforts, in CY2023 the VCCC achieved a 91% percent viral suppression rate, the highest in its history. Of the nine percent not reaching viral suppression, three percent are due to not receiving a test during CY2023 and the remaining six percent are either transitioning into care or not controlling the virus. VCCC staff continuously work with these individuals to get them into consistent, effective care. Due to the severity and health impacts of HIV, the VCCC's policy is that any individual who has been lost-to-care may resume treatment at the VCCC. Choosing to resume HIV treatment is a critical step toward limiting HIV transmission, and the VCCC strives to create a welcoming, judgement-free environment so that clients feel valued for making the correct decision both for their health and the health of their partners.

V. Service Specific Questions:

1. Service Model

Provide a work plan that delineates all steps and activities that will be used to achieve the goals and objectives of your proposed project. Include all aspects of planning, implementation, and evaluation, listing the role of everyone involved in activity.

2. Work Plan

Provide a work plan that delineates all steps and activities that will be used to achieve the goals and objectives of your proposed project. Include all aspects of planning, implementation, and evaluation, listing the role of everyone involved in each activity.

The work plan should include clearly written:

1. Goals
2. Objectives that are specific, time-framed, and measurable
3. Action steps
4. Staff responsible for each action step; and
5. Anticipated dates of completion.

Please note that goals for the work plan are to be written for the first year of the grant.

Discuss any challenges that are likely to be encountered in planning and implementing the project's activities described in the work plan and describe realistic and appropriate approaches to be used to resolve these challenges.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Project Approach and Process

Service Model

The VCCC is a comprehensive outpatient treatment program for people living with HIV. It has over 30 years of experience developing and managing complicated care provision programs and the funding requested in this proposal would support specific efforts that are incorporated into the mission of the VCCC.

Services provided to PLWHA at the VCCC include the following:

- Clinical and Laboratory Evaluation (Primary Care, Colposcopy, Obstetrics and HIV)
- Clinical Pharmacy Services and Patient Assistance Program
- Clinical Trials Access
- Coordination of Home Care, Hospice, Infusion Transfusion Services
- Food Pantry
- Harm Reduction
- High Resolution Anoscopy
- Inpatient Care Direction
- Medical Case Management as Defined by HRSA
- New Patient Navigation
- Nutrition Services
- On-call Services
- PrEP Clinic
- Psychiatric Care and Behavioral Health Services
- Transition of Care Case Management
- Transportation Assistance

Specifically, Ryan White Part A funding will support direct medical, laboratory, and diagnostic services for PLWH as well as other core medical services needed to ensure treatment adherence, including behavioral health services, pharmacy case management, including referral services and PNCM support, and social workers who provide medical case management per HRSA's definition. Specific services are detailed below, based on service category.

Medical Case Management (Social Workers)

Due to the significant impact a diagnosis of HIV can have on an individual and their family as well as the difficulty of navigating the suite of Ryan White or other HIV/AIDS-related support services, the VCCC employs social workers who provide medical case management support to clients as defined by HRSA. At the VCCC, social workers:

- perform a psychosocial assessment on all new intakes. This 90-minute appointment consists of educating clients about HIV, providing therapeutic support for processing the diagnosis, determining eligibility for Ryan White services, and connecting the client to other CBOs and ASOs for additional resources;
- assist with Rapid Art Start appointments for qualifying clients;
- assist clients enrolling in ACA insurance plans during annual open enrollment;

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Project Approach and Process

- enroll, re-enroll, or dis-enroll clients in Ryan White services, as determined by financial need;
- assist clients with enrollment in Medicare and helps with other billing or insurance problems;
- provide brief therapy and crisis intervention;
- collaborate with other clinic staff to identify a client's barriers to treatment adherences and brainstorm, plan, and implement intervention strategies to solve complex client problems that inhibit care;
- identify clients or are or may become at-risk individuals;
- reach out to clients who have been lost-to-care;
- communicate regularly with clients throughout the year.

Mental Health (Behavioral Health Consultants)

Ryan White Part A partially funds three behavioral health specialists to provide behavioral health services to clients who are eligible for Ryan White Part A services. Support may include crises counseling, individual therapy, substance use disorder therapy, and therapy to address targeted behavioral issues. The VCCC behavioral health team has a designated person available during clinic hours to assist with behavioral health needs while the client is in the clinic meeting with their provider.

VCCC also provides clients who need additional behavioral health support with access to a psychiatrist and a psychiatric nurse practitioner. The psychiatrist is not funded through Ryan White Part A whereas care provided by the psychiatric nurse practitioner would be covered through the outpatient and ambulatory care process detailed in the section above.

Outpatient/Ambulatory Care (Direct Medical Services and PNCM)

VCCC will use a substantial portion of Ryan White Part A funds to cover the expense of outpatient care to uninsured clients who are eligible for Ryan White Part A. Social Work Medical Case Managers, funded in part by this grant, will work to ensure that Ryan White-eligible clients with insurance – whether through their employer, through the ACA marketplace, or through another insurance provider (i.e. Medicare or Tricare) are enrolled into the Ryan White Insurance Assistance Program. VCCC will always consider Ryan White Part A the payor-of-last-resort for outpatient or ambulatory care expenses.

The bulk of direct medical and laboratory services funded through outpatient and ambulatory services will be conducted by VCCC providers, including nine physicians, three nurse practitioners (NP), and seven fellows. In total, these providers have 120 years of experience treating PLWHA at the VCCC. All clinical providers funded by this proposal are well-qualified for their role. Each physician is board certified in Internal Medicine and Infectious Diseases and each NP has been trained at the VCCC in HIV specialty care and is precepted by a VCCC physician who is available for consult as needed. All NPs follow defined treatment protocols for HIV related care and general medical care. NP charts are reviewed and co-signed by precepting physicians as per Tennessee law. VCCC will break

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Project Approach and Process

outpatient and ambulatory care billings into three categories: 1) Hospital Billings, 2) Specialty Billings, and 3) VCCC Medical Services.

Hospital billings will cover lab testing and non-lab expenses (such as x-rays, scans, and other imaging) ordered by VCCC providers through outpatient services. Labs and non-labs ordered during emergency visits or by non-VCCC providers (excluding specialty providers referred to by VCCC providers) will be excluded from this billing. A full list of labs and non-labs eligible for fee reimbursement through Ryan White Part A will be listed in an agreed-upon Fee Schedule.

Vanderbilt Professional Laboratory Services (VPLS) provides access to an extensive menu of anatomic and clinical referral services available from the laboratories of Vanderbilt Medical Center to over 1,000 healthcare providers in 48 states and 12 countries. VPLS clients are given timely, high-quality testing services by this CAP-accredited laboratory and valuable professional consultation services by Vanderbilt pathologists. The VUMC Diagnostic Laboratory is licensed by State of Tennessee Department of Health and is CLIA and CAP certified.

Specialty billing will cover the expense of referring Ryan White Part A to specialists for additional testing and care. To be eligible for reimbursement, the initial referral will be from a VCCC provider. The specialist may then treat the client, order appropriate tests, or refer the client to a second specialist for additional care. The second specialist may order tests necessary and treat the client. If the second specialist believes an additional referral is required, the client will need to return the VCCC so that a VCCC provider may review the client's medical records and refer the client to the new specialist. At which point, the cycle begins again.

VCCC medical services billings will cover treatment received by the client at the VCCC. These will be the reimbursement of professional fees generated by the client's visit.

VCCC staff will review the hospital, specialty, and medical billings each month to ensure charges are appropriate. Charges with the following issues will be denied by VCCC staff and will return to VUMC for eventual coverage through charity care or another funding source:

1. Charge are more than three months prior.
 - a. Example: a charge for a service in August does not appear in VUMC's billing system until December. This charge is more than three months old and will be denied.
2. Department services are not covered.
 - a. Example: a charge from the emergency room appears on the specialty billings spreadsheet. This charge is not for outpatient care and will be denied.
3. Not a covered service.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Project Approach and Process

- a. Example: a procedure not on the Ryan White Part A fee schedule is ordered. This charge is not a covered service and will be denied.
4. Client has insurance.
 - a. Example: a procedure is ordered, and a review of the client's record shows they had employer insurance at the time of service. This charge will be denied.
5. Referral not by VCCC within the last 12 months.
 - a. Example: a client meets with a specialist for a procedure thirteen months after a VCCC provider issues the referral. This charge will be denied.
6. Ordering provider is not VCCC.
 - a. Example: The second specialist refers the client to a third specialist for additional care. Instead of returning to VCCC to formalize the procedure, the client makes an appointment and goes to the third specialist. This charge will be denied.

The second element of outpatient/ambulatory care will be the fee-for-encounter reimbursement of the work of VCCC's PNCMs. These staff members meet with clients to help address any issues that may arise through treatment, including identifying ADEs or pADEs or potential adverse effects based on conversations with the client or other issues that may impact medication adherence. These meetings may take place face-to-face or non-face-to-face via faxes, letters, MHAV messages, phone calls, text messages, videoconference, or other methods that clients may reach out to their PNCM.

The VCCC will maintain records of charges reimbursed through the outpatient or ambulatory billing reimbursement process and MPHDP may review those records as part of their annual audit process. Billings for outpatient and ambulatory care will be submitted to MPHDP monthly along with billings for other elements of the Ryan White Part A grant.

Referral Services

Partially funds an LPN who completes prior authorizations for medications prescribed by a VCCC provider, assists clients in applying for and receiving free medications through national pharmacy assistance programs, and assists with copay applications.

Work Plan

This work plan describes the objectives of the services provided by the VCCC based on the percent of clients relying on Part A funding for their direct medical services (10% of total clients) or reside in the TGA (50%) projections of program output are based on our work plan projections for Ryan White Parts C and D programs adjusted for Ryan White Part A. Clients who rely on Part A funding for direct medical services are typically more complicated and challenging than insured clients and may require more clinical services.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI
Project Approach and Process

Medical Case Management (Social Workers)			
<i>Goal</i>	<i>Objective</i>	<i>Timeline</i>	<i>Responsible</i>
Number of Ryan White Part A-Eligible Clients Receiving MCM Services from Social Workers	1800	GY2025 - 2026	VCCC Director and Medical Director
Number MCM Service Units for Social Workers for Ryan White Part A Eligible Clients (15 minutes per unit).	6,600	GY2025 - 2026	VCCC Director and Medical Director
Number of Assessment or Reassessment Service Units for Social Workers for Ryan White Part A-Eligible Clients	4,104	GY2025 - 2026	VCCC Director and Medical Director
Mental Health (Behavioral Health Consultants)			
<i>Goal</i>	<i>Objective</i>	<i>Timeline</i>	<i>Responsible</i>
Number Behavioral Health Units with Ryan White Part A-eligible Clients (15 minutes per unit)	400	GY2025 - 2026	VCCC Director and Medical Director
Outpatient and Ambulatory Care			
<i>Goal</i>	<i>Objective</i>	<i>Timeline</i>	<i>Responsible</i>
Number of New, Uninsured Clients Receiving Direct OA Care at the VCCC through Ryan White Part A	35	GY2025 - 2026	VCCC Director and Medical Director
Number of All Uninsured, RW Part A-eligible Clients in TGA Receiving Direct OA Care	400	GY2025 - 2026	VCCC Director and Medical Director
Number of Visits to the VCCC by Clients in the TGA Receiving Direct OA Care	800	GY2025 - 2026	VCCC Director and Medical Director
Number of Encounters with PNCM by Ryan White Part A Eligible	7,400	GY2025 - 2026	VCCC Director and Medical Director
Referral Services			
<i>Goal</i>	<i>Objective</i>	<i>Timeline</i>	<i>Responsible</i>
Number Referral Units for Clinical Pharmacy Services for Ryan White Part A Eligible Clients (15 Minutes per Unit)	1900	GY2025 - 2026	VCCC Director and Medical Director
Number of Ryan White Part A-Eligible Clients Receiving Pharmacy Assistance to Access Medications ¹²	600	GY2025 - 2026	VCCC Director and Medical Director

¹² Includes patience assistance program, copay assistance, and prior authorizations

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Project Approach and Process

Program Evaluation and Clinical Quality Improvement (CQI)

The VCCC's CQI committee examines and reports on specific clinical and process outcomes regarding all levels of services. The CQI committee is comprised of employees from all areas of clinic operations and addresses specific issues related to program outcomes. Suggestions for CQI evaluation can come from any member of the committee, from clinic leadership to front-line staff. This range of perspectives promotes continuous improvement at all levels of the VCCC. The CQI committee works collaboratively with representatives from Ryan White Parts A, B, C, and D funders to craft CQI projects that align with those sponsors' needs as well.

An example of a recent CQI project the VCCC has done is a review of the VCCC's insurance rates, detailed below:

Background

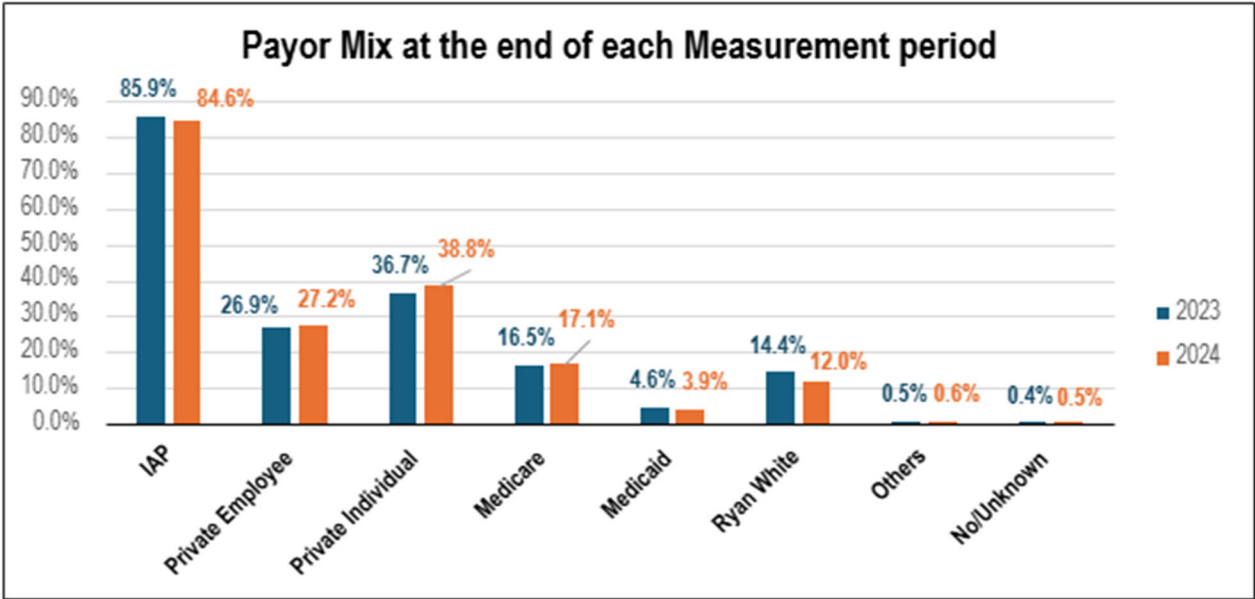
Due to the expense of treating PLWHA and the changing landscape of funding in the State of Tennessee, it is critical that VCCC clients are enrolled in an insurance program whenever possible. Because of the complexity of treating HIV and other potential health impacts, insurance coverage allows clients to access both HIV-specific care and traditional primary and specialist care more consistently and with less concern about cost. Furthermore, the Ryan White program allows clients who make 400% or below of the federal poverty level for their family size receive additional financial support to cover HIV treatment through the Insurance Assistance Program (IAP) and AIDS Drugs Assistance Program (ADAP). These resources can reduce the financial impact of treating HIV. Overall, access to insurance improves health care for PLWHA and translates into higher rates of viral suppression in clients with insurance.

For Ryan White Part A, a sizable portion of the clinic's award goes to cover direct medical costs for uninsured PLWHA who live within the TGA. Due to the expense of health care, this spending category is the greatest line item in the clinic's annual proposed budget and actual spend. Increasing insurance enrollments may result in reduced expenditures on this line item and those savings could be applied elsewhere to support clinic operations or additional services. The VCCC's Ryan White Part B funder, the State of Tennessee, goal is to increase insurance enrollment and maximize the health impacts of their expenditures, so this project aligned with their needs.

The CQI program for the VCCC was to evaluate insurance enrollment for clients who received Medical Case Management (face-to-face or non-face-to-face) from CY2023 to CY2024. This could include enrollment in IAPs, in private insurance, in employer-sponsored insurance, and in governmental-sponsored care such as Medicaid, Medicare, and Tricare. Developing a deeper understanding of how VCCC is improving insurance access will allow staff to strategize specific interventions to continuously improve insurance rates.

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI
Project Approach and Process

Payor Type	Number of Clients		% of Clients	
	2023	2024	2023	2024
IAP	1380	1585	85.9%	84.6%
Private Employee	508	583	26.9%	27.2%
Private Individual	692	830	36.7%	38.8%
Medicare	311	365	16.5%	17.1%
Medicaid	86	83	4.6%	3.9%
Ryan White	271	256	14.4%	12.0%
Others	10	13	0.5%	0.6%
No/Unknown	7	10	0.4%	0.5%
Total # of Clients	1885	2140	100%	100%



Between CY2023 and CY2024, the total number clients served by the VCCC remained constant (3,804 and 3,811, respectively). In CY2024, a greater percentage of the VCCC’s clients received Medical Case Management (50% to 56%). This increase translated into improved insurance rates, especially in the private individual category (2.1% increase). The slight decrease in IAP and Ryan White are connected to the income levels of the VCCC’s clients, so the clinic is seeing an increase in clients whose annual income exceeds 400% of the Federal Poverty Level for their family size. Because the aim of the CQI project was to qualify clients on insurances other than Ryan White, the decline of 2.4% of clients on Ryan White program assistance is also a success.

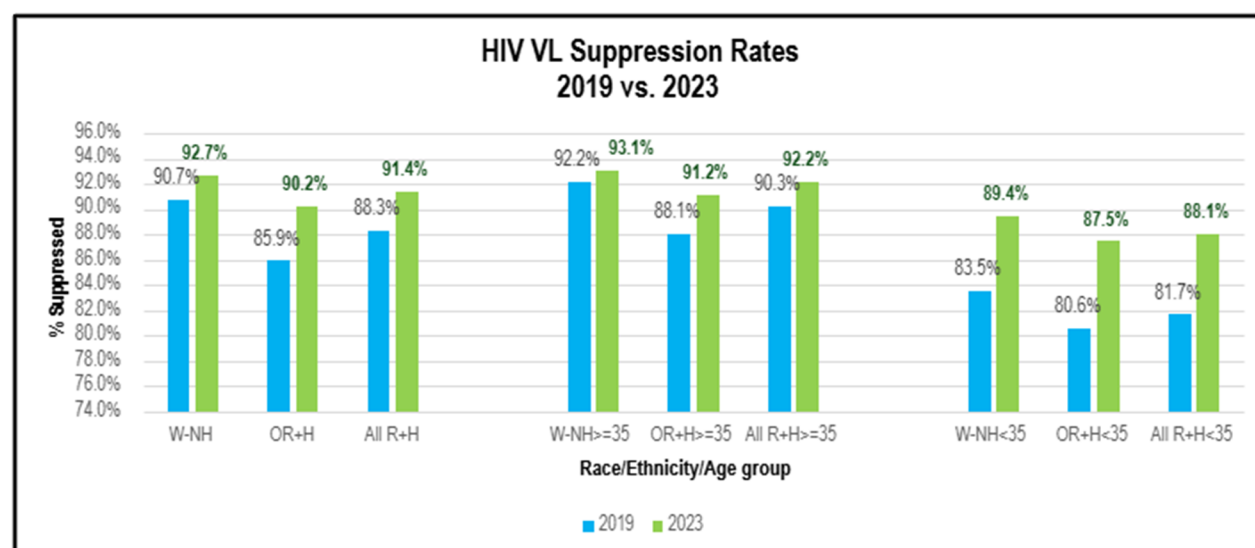
Viral Suppression Rates

The primary focus of the VCCC is to increase the viral suppression rates of its clients. This results in a continuous CQI focus centered around improving these metrics. To better align with State of TN population categories, the VCCC has analyzed its HIV viral suppression rates for PLWHA who are under 35 and PLWHA who are 35 or older. Historically, as PLWHA

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Project Approach and Process

age, their viral suppression rate increases. VCCC believes this is due to an increase in financial security, access to insurance increases, and housing stability as individuals age and develop their professional careers. A comparison of viral suppression rates for these two age groups, comparing CY2019 (the prior Ryan White Grant Application Year) with CY2023, the year with final viral suppression rates available.

	% Clients				
	HIV VL Suppression		% Increase	Without HIV VL Test	
	2019	2023		2019	2023
W-NH ¹³	90.7%	92.7%	1.9%	1.9%	2.8%
OR+H ¹⁴	85.9%	90.2%	4.3%	2.6%	2.7%
All R+H ¹⁵	88.3%	91.4%	3.1%	2.2%	2.7%
W-NH>=35	92.2%	93.1%	0.9%	1.8%	3.0%
OR+H>=35	88.1%	91.2%	3.1%	2.4%	2.6%
All R+H>=35	90.3%	92.2%	1.9%	2.1%	2.8%
W-NH<35	83.5%	89.4%	5.9%	1.9%	1.4%
OR+H<35	80.6%	87.5%	6.9%	3.2%	3.0%
All R+H<35	81.7%	88.1%	6.4%	2.7%	2.5%



Between CY2019 and CY2023, the VCCC saw substantial improvements the viral load suppression rates for PLWHA under and over 35, both for the clinic population as a whole and for demographic subgroups

¹³ White, Non-Hispanic

¹⁴ Other Races and Hispanic

¹⁵ All Races and Hispanic

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI
Project Approach and Process

Specific highlights include an increase of 4.3% of viral suppression in non-white clients of other races and Hispanic for all ages, with increases of 3.1% and 6.9% for the 35 and over age group and under 35 age group, respectively. In all categories, the VCCC’s viral load suppression rate increased.

VCCC may use this data to identify a potential CQI project in the future. For example, there was an increase of 0.5%in the percentage of clients of all races and Hispanic who did not take an HIV viral load test in CY2023 and an increase of 0.7% among all races and Hispanic clients who are 35 and older. The VCCC can take this analysis to the CQI committee for further reviews and determine if a CQI projected centered around improving the rate of HIV testing for specific categories is an appropriate project and – if approved – strategize with stakeholders for ways to improve performance in that area.

Timeline

A general timeline for CQI projects is outlined below. Because Ryan White Parts A and B funding begins in the spring, CQI projects for those grants are typically determined in the spring in partnership with the funders. The CQI team meets to determine the final metrics, strategize approach, and begin the project. Data is reviewed continuously throughout the year to determine if any adjustments are needed, and a final analysis is completed at year end.

Task	Who	Due Date
Define and generate data set	CQI Committee and RW Funders	Spring 2025
Develop and implement CQI approach	CQI Committee and impacted staff	Spring 2025
Present to the CQI Committee for review and recommendations	CQI Committee	Ongoing, during bi-monthly CQI meetings
Review Impact	CQI Committee	Winter 2026

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI
Budget

D. Budget (35 Points)

Complete the entire Budget Spreadsheet attachment (excel version) which describes how you will use the funds to provide the service requested in the scope of work for this solicitation. Include detailed information about the number and type of staff your firm will fund, staffing costs and other specific costs associated with providing the services.

Contractors will be allowed to budget up to 10% for administrative costs, including indirect charges.

Leaving blanks on any of the Budget Spreadsheets and/or not following the provided format may result in your proposal being deemed non-responsive.

See attached Budget Spreadsheets for each of the funding categories VCCC is requesting funding for:

1. Attachment 11A: Medical Case Management (Social Workers) Budget
2. Attachment 11B: Mental Health (Behavioral Health Consultants) Budget
3. Attachment 11C: Outpatient/Ambulatory Care
4. Attachment 11D: Referral Services

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI
Attachment 01: Letters of Support from ASOs

Attachment 01: Letters of Support from ASOs



January 29, 2025

Dr. Sean Kelly
Vanderbilt Comprehensive Care Center
719 Thompson Lane, Suite 37189
Nashville, TN 37204

Dear Dr. Kelly:

Neighborhood Health is delighted to learn that Vanderbilt Comprehensive Care Center is seeking (VCCC) Ryan White funding to continue to provide comprehensive services for individuals living with HIV/AIDS.

Neighborhood Health knows first-hand the local need among underserved members of our communities, particularly our Black, LGBTQIA, drug-using and other marginalized communities. These individuals have few healthcare options.

VCCC increases access to unique specialized care for those living with HIV/AIDS. Care provided by VCCC is provided nowhere else in our community. VCCC was the first agency in Nashville to recognize the need for special medical care and participate in research to ensure clinical advances for treating those who were HIV positive. VCCC now also cares for high-risk pregnant women that are living with HIV. Your pediatricians care for the infant after birth, ensuring a safe delivery.

Neighborhood Health has worked with VCCC to develop a productive partnership. We appreciate that VCCC is there to receive our refer clients, especially those with hepatitis B or hepatitis C coinfection. Through this close partnership, we maximize our collective impact in our community, improve the health of our highest risk residents, and reduce HIV/AIDS transmission.

Neighborhood Health pledges to continue to work closely with VCCC to improve the health of everyone in our community.

Sincerely,

A handwritten signature in black ink that reads "Brian Haile". The signature is written in a cursive, flowing style.

Brian Haile
Patient & Chief Executive Officer

January 31, 2025

Dear Dr. Kelly,

We are very pleased to learn that Vanderbilt Comprehensive Care Clinic (VCCC) is seeking Ryan White Part A funding to continue to provide comprehensive services for individuals living with HIV/AIDS.

VCCC, Tennessee's largest HIV treatment center, knows first-hand the local need among underserved members of our communities, particularly persons of color, members of the LGBTQIA community, persons affected by substance use disorder, and other marginalized groups.

Nashville CARES eliminates barriers to HIV care and access to care in several ways: medical case management and insurance navigation, housing assistance, nutrition assistance, transportation assistance, behavioral health care, HIV and STI testing and linkage to care, in addition to comprehensive HIV care and pre-exposure prophylaxis (PrEP) care across the care continuum. Over several decades, we have worked with VCCC to develop a productive partnership and successfully co-manage many patients together. As partners, we maximize our collective impact in our community, improve the health of our highest risk residents, and reduce HIV/AIDS transmission.

We pledge to continue to work closely with VCCC to improve the health of everyone in our community.

Sincerely,

A handwritten signature in dark ink, appearing to read 'Amna', with a stylized flourish at the end.

Amna Osman
CEO, Nashville CARES

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI
Attachment 02: Resume and Job Description of Financial Manager

Attachment 02: Resume and Job Description of Financial Manager

Adrian McBride

1337 Duns Lane Nolensville, TN | (323) 309-2049 | Adrian.n.mcbride@vumc.org

Profile

Professional public programs administrator with experience in grant writing, budget management, community engagement, volunteer management, data management, and internal and external collaboration.

Experience

PROGRAM MANAGER | VANDERBILT UNIVERSITY MEDICAL CENTER | 02/2024 – PRESENT

- Manage day-to-day grant compliance and management for Ryan White Parts A-D grants, with annual expenditures exceeding \$3 million
- Collaborate with data administrative and clinic leadership to submit grant reports and data to funders
- Oversee the drafting and submitting application process through internal VUMC systems and funders' systems
- Partner with VUMC accounting staff to ensure accurate and timely submittal of monthly invoices
- Partner with VUMC legal staff to provide initial review and comments on grant contracts and other legal documents

COMMUNITY PROGRAMS ADMINISTRATOR | SAN JOSE PUBLIC LIBRARY | 11/2020 – 07/2023

- Supervised staff of nine who manage a variety of public-facing programs, including an adult literacy program, an alternative high school diploma program, an ESL program, and a high school scholarship program
- Managed annual budget for Partners In Reading (PAR) unit of approximately \$1 million from multiple funding sources, including state grants, city general funds, and private donors
- Oversaw migration of program data from internal MS Access database to cloud-based database resulting in improved data accuracy and streamlined reporting
- Researched and applied for state grants to secure ongoing financial support for adult literacy programming and to develop new programs for San José's highest-needs community members
- Served as staff lead for over 30 librarians who focus on either college and career readiness programs or adult programs at 25 branch libraries
- Led development and implementation of a citywide College and Career Readiness Logic Model across 13 City of San José departments to better align City-provided educational and career opportunities for youth and young adults
- Partnered with the City of San José Mayor's Office and San José Public Library Foundation to obtain over \$5 million in donations to date from corporate and private donors with goal of an endowment of over \$10 million to ensure program longevity

LITERACY PROGRAMS ADMINISTRATOR | SAN JOSE PUBLIC LIBRARY | 06/2018 – 11/2020

- Conceived, developed, and iterated the SJ Aspires program, a scholarship program that provides post-secondary funding to over 1,200 students at Title I schools in San José

- Drafted and executed MOUs, RFPs, and other contract and compliance documentation needed to formalize partnerships for SJ Aspires with school districts and service providers
- Managed ongoing partnership with Salesforce consultant to develop and iterate database administrative backend (Summer 2020), design and implement a student community portal (Winter 2021), and create a mobile application (Spring 2022)
- Led the development and adoption of citywide College and Career Readiness Quality Standards by collaborating with stakeholders from city departments, secondary schools, post-secondary institutions, and apprenticeship/internship programs throughout San José

CTE INCENTIVE GRANT COORDINATOR| LOS ANGELES UNIFIED SCHOOL DISTRICT | 06/2017 – 06/2018

- Managed over \$4 million in state grant funds at 11 middle and high schools in Los Angeles
- Reviewed and approved program expenditures for over 20 Career Technical Education pathways, including graphic design, photography, video production, performing arts, engineering, and business administration
- Presented on new, in-progress, and model programs to teachers and administrators at district-wide professional development events
- Provided an overview of, reviewed, and provided feedback on grant applications for teachers and administrators at assigned schools
- Evaluated and determined final allocation of funds for grant proposals from over 70 CTE programs as part of formal, internal LAUSD evaluation process

CHARTER SCHOOL PROPOSAL WRITER| PATHWAYS MANAGEMENT GROUP | 06/2016 – 05/2017

- Drafted grant and charter proposals to foundations and authorizers
- Obtained required proposal materials from multiple departments
- Awarded charter start-up grant from Albertson Family Foundation along with charter authorization from Nampa School District (Idaho)

PROGRAM DIRECTOR, WRITERS IN THE SCHOOLS| UNIVERSITY OF ARKANSAS | 08/2012 – 05/2014

- Developed and constructed official website, including anthology archive and teaching materials, to demonstrate program's history in Arkansas
- Managed annual budget of \$50,000 and organized related records
- Increased number of participating schools by over 50% from 2012 to 2014
- Trained, scheduled, and supervised over 20 WITS instructors per year
- Designed and published 2012-13 and 2013-14 Writers in the Schools Poetry Anthology

INSTRUCTOR | UNIVERSITY OF ARKANSAS | 01/2011 – 08/2012

- Taught Composition 1013 and 1023 core courses to over 40 undergraduate students per semester, including curriculum design, rubric design, and grading

COMPLIANCE MANAGER | JIM JEAN CHE COMPANY | 07/2008 – 08/2010

- Monitored product production from raw material to final inventory
- Supervised transition from traditional to consignment-based ordering for major customer

- Revised internal documentation and procedures to meet AS-9100 certification requirements and oversaw initial awarding of AS-9100 certification

SECONDARY ENGLISH TEACHER | BELL HIGH SCHOOL (LAUSD) | 08/2003 – 07/2007

- Taught 9th to 12th grade Remedial, Regular, Honors, and AP English courses to 150+ students per year
- Coached Academic Decathlon to increase of 20+ places in LAUSD competition over three years
- Oversaw training and assessment of LAUSD Periodic Assessment Exams, including teacher training, grading, and data analysis

Education

MFA IN CREATIVE WRITING, FICTION | MAY 2014 | UNIVERSITY OF ARKANSAS

B.A. IN ENGLISH | MAY 2002 | UNIVERSITY OF SOUTHERN CALIFORNIA

Skills & Abilities

- | | |
|--------------------|-------------|
| · Microsoft Office | · Workday |
| · Google Drive | · CAREWares |
| · Salesforce | |

Overview

Overview

Inactive	No
View As Of	01/31/2025
Date of Last Change	01/31/2025 09:46:29.143 AM
Job Profile Name	3543 - Program Manager
Job Code	3543
Include Job Code in Name	No
Job Profile Summary	JOB SUMMARY Plans, develops and executes ongoing program(s) that impacts a significant segment of the organization under occasional guidance.
Job Description	KEY RESPONSIBILITIES • Oversees the creation, coordination and execution of the program. • Provides budgetary management to the program. • Provides training and guidance for individuals supporting the program. • Promotes growth and expansion of the program. • The responsibilities listed are a general overview of the position and additional duties may be assigned. TECHNICAL CAPABILITIES • Program Management (Intermediate): Planning, organizing, and managing resources to bring about the successful completion of specific program goals and objectives. • Financial Processes (Intermediate): Ability to monitor costs, expenses and revenue as well as the ability to manage those costs and expenses in relation to budgeted amounts. • Process Improvement (Intermediate): Identifies, analyzes and improves upon existing business processes for optimization and to meet standards of quality. • Peer Leadership (Intermediate): The ability to show leadership and influence people of equal rank in an effort to accomplish team goals. • Networking (Intermediate): Build relationships through industry contacts, professional organizations and individuals. • Quality Management (Intermediate): Developing a systematic process of checking to see whether a process or service is meeting specific requirements.
Additional Job Description	PHYSICAL REQUIREMENTS "Sedentary" category requiring exertion up to 10 lbs. of force occasionally and uses negligible amounts of force to move objects. Sedentary work involves sitting most of the time. PHYSICAL DEMANDS Odor - Not Applicable Electrical current - Not Applicable Working in high, exposed places - Not Applicable Proximity to moving mechanical parts - Not Applicable Radiation: May be exposed to occupational radiation, requiring enrollment in VUMC's Radiation Safety Program which includes training, use of personal protective equipment with lead shielding, and personal dose monitoring. - Not Applicable Pathogens: Risk of exposure to bloodborne pathogens and other contagious illnesses. - Not Applicable Climate: Ability to withstand exposure to atmospheric extremes including heat, cold, humidity, and barometric pressure changes. - Not Applicable Dust - Not Applicable Mist - Not Applicable Vibration: Subject to oscillating movement. - Not Applicable Bimanual Dexterity: Requiring the use of both hands. - Frequent Sitting: Remaining in seated position - Frequent Standing: Remaining on one's feet without moving. - Occasional Walking: Moving about on foot. - Occasional Lifting under 35 lbs: Raising and lowering objects under 35 lbs from one level to another - Occasional Lifting over 35 lbs: Raising and lowering objects from one level to another, includes upward pulling over 35 lbs, with help of coworkers or assistive device - Not Applicable Carrying over 35 lbs: Transporting an object holding in hands, arms or shoulders, with help of coworkers or assistive device. - Not Applicable Carrying under 35 lbs: Transporting an object holding in hands, arms or shoulders, with help of coworkers or assistive device. - Occasional Push/Pull: Exerting force to move objects away from or toward. - Occasional Bending/Stooping: Trunk bending downward and forward by bending spine at waist requiring full use of lower extremities and back muscles - Not Applicable Balancing: Maintaining body equilibrium to prevent falling when walking, standing, crouching or maneuvering self, patient and equipment simultaneously while working in large and small spaces - Not

Applicable Crawling: Moving about on hands and knees or hands and feet. - Not Applicable Climbing: Ascending or descending stairs/ramps using feet and legs and/or hands and arms. - Not Applicable Kneeling: Bending legs at knees to come to rest on knee or knees. - Not Applicable Crouching/Squatting: Bending body downward and forward by bending legs and spine. Reaching above shoulders: Extending arms in any direction above shoulders. - Not Applicable Reaching above shoulders: Extending arms in any direction above shoulders. - Occasional Reaching below shoulders: Extending arms in any direction below shoulders. - Frequent Handling: Seizing, holding, grasping, turning or otherwise working with hand or hands. - Not Applicable Fingering: Picking, pinching, gripping, working primarily with fingers requiring fine manipulation. - Frequent Auditory: Perceiving the variances of sounds, tones and pitches and able to focus on single source of auditory information - Continuous Communication: Expressing or exchanging written/verbal/electronic information. - Continuous Vision: Clarity of near vision at 20 inches or less and far vision at 20 feet or more with depth perception, peripheral vision, color vision. - Continuous Smell: Ability to detect and identify odors. - Continuous Feeling: Ability to perceive size, shape, temperature, texture by touch with fingertips. - Not Applicable Noise: May include exposure to occupational noise levels which equal or exceed an 8-hr time-weighted average of 85 decibels, requiring enrollment in VUMC's Hearing Conservation Program which includes training, use of hearing protection, and periodic audiometry. - Not Applicable Chemicals and Gasses: Medications, cleaning chemicals, oxygen, other medical gases used in work area. - Occasional Taste: Ability to detect quality, texture, consistency and taste of prepared foods/quality control. - Not Applicable

Job Title Default	Program Manager
Restrict to Country	
Management Level	Professional
Job Level	2 Professional
Job Family	Program Project
Job Category	Project Coord & Mgt
Job Classifications	2.1Y - PRJ - Project Coord & Mgt Professionals (Affirmation Action Group-United States of America) BGP-09 - Criminal, Education, Employment (BGP-United States of America) Indirect - Indirect Patient Care (Patient Care Indicator-United States of America) None - 0 (Officer Code-United States of America) Professional Nonfaculty - Professional Nonfaculty (EEO-6-United States of America) Professionals - Professionals (EE0-1-United States of America) Recruiting - Recruiting (Hiring Source-United States of America) Regular - Regular (Worker Sub Type-United States of America)
Work Shift Required	No
Public Job	Yes
Referral Payment Plan	

Characteristics

Difficulty to Fill	
Critical Job	No

Compensation

Compensation Grade	X36
Compensation Grade Profile	
Impacted Eligibility Rules	



Additional Data

View As Of

01/31/2025

Employee Class

Employee Class

Staff

Fixed or Variable

Fixed or Variable

Fixed

Business Process History

Business Process History

Business Process	Effective Date	Initiated On	Completed On	Status
------------------	----------------	--------------	--------------	--------

Qualifications

Certifications

Certification

Required	Country	Certification (Predefined)	Certification (Not Predefined)	Issuer (Not Predefined)	Specialty	Subspecialty
----------	---------	----------------------------	--------------------------------	-------------------------	-----------	--------------

Competencies

Competencies from Other Sources

Required	Competency	Target Rating	Source	Source Type
----------	------------	---------------	--------	-------------

Education

Education

Required	Degree	Field of Study
	Bachelor's	

Languages

Languages

Required	Language	Ability	Proficiency
----------	----------	---------	-------------

Responsibilities

Responsibilities

Required	Responsibility
----------	----------------

Training

Training

Required	Training	Training Type	Description
----------	----------	---------------	-------------

Work Experience

Work Experience

Required	Work Experience	Experience Level
Yes	Relevant Work Experience	3 years

Equivalence Rule

Equivalence Rule

Equivalence Rule	Derived Logic
------------------	---------------

Pay

Pay Rate Type

Pay Rate Types

Country	Pay Rate Type
United States of America	Salary

Job Exempt

Job Exempt

Country / Country Region	Job Exempt
United States of America	Yes

Workers' Compensation Code

Worker's Compensation Codes

Workers' Compensation Code	Country	Country Region	Location
8833 - Hospital: Professional Employees (United States of America)	United States of America		

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI
Attachment 03: State Licensure or Accreditation

Attachment 03: State Licensure or Accreditation

Last Updated: 1/31/2025

For more information, please contact
Health Care Facilites
(615)741-7221 or 800-310-4650

Health Care Facilities

Licensed Facilities

Current Listings

Type = Hospital
County = All
Results = 1
Total Beds = 1245

[Click here to return to the search page](#)

1	Vanderbilt University Medical Center 1211 Medical Center Drive Nashville, TN 37232 615-322-3454	Administrator: C. Wright Pinson, M.B.A., M.D. Owner Information: Vanderbilt University Medical Center 1211 Medical Center Drive Nashville, TN 37232 615-322-3454 Facility License Number: 00000027 Status: Licensed Number of Beds: 1245 Date of Last Survey: 10/31/2019 Accreditation Expires: 11/20/2024 Date of Original Licensure: 09/22/1947 Date of Expiration: 04/29/2025 No Disciplinary Actions
---	--	--

CERTIFICATE OF DISTINCTION

has been awarded to

Vanderbilt University Medical Center
Nashville, TN

as a
Primary Care Medical Home
by



The Joint Commission
based on a review of compliance with
The Joint Commission's requirements for Certification

August 10, 2024

Certification is customarily valid for up to 36 months.


Michael Suk, MD, JD, MPH, MBA, FACS
Chair, Board of Commissioners

ID #7892
Print/Reprint Date: 01/06/2025


Jonathan B. Perlin, MD, PhD, MSHA, MACP, FACMI
President and Chief Executive Officer

The Joint Commission is an independent, not-for-profit national body that oversees the safety and quality of health care and other services provided in certified organizations. Information about certified organizations may be provided directly to The Joint Commission at 1-800-994-6610. Information regarding certification and the certification performance of individual organizations can be obtained through The Joint Commission's web site at www.jointcommission.org.





[Home](#) > [Who We Are](#) > [Who We Work With](#) > [Find Accredited Organizations](#)

Find Accredited Organizations

The Joint Commission is proud to accredit nearly 15,000 healthcare organizations and certify and verify over 4,600 programs across the continuum of care in the United States.





Earning accreditation, certification or verification from The Joint Commission signifies many things, with none larger than a devotion to patient safety and quality of care. By earning our *Gold Seal of Approval*[®], healthcare organizations and programs exemplify their commitment to using best practices to improve safety and quality for their patients, staff and community.

Through the accreditation, certification and verification process, organizations and programs undergo an objective evaluation process to measure, assess and improve performance. Our state-of-the-art standards focus on patient safety and quality.

care to help reduce the risk of errors and allow for continuous improvement.

If you are looking for organizations outside of the United States, view Joint Commission [International accredited organizations listings](#).

Vanderbilt University Medical Center



Result 1 of 1 for Vanderbilt University Medical Center

ORGANIZATION LISTING



Vanderbilt University Medical Center

HCO ID: 7892
DBA: Vanderbilt University Hospital
1211 Medical Center Drive
Nashville, Tennessee 37232-2101

Website:
<http://www.vumc.org>

Accredited Programs



	Decision	Effective Date
Hospital	Accredited	08/10/2024
Behavioral Health Care and Human Services	Accredited	08/06/2024

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI
Attachment 04: Articles of Incorporation

Attachment 04: Articles of Incorporation



BILL GARRETT, Davidson County

Trans: T20150020158 CHARTER

Recvd: 03/19/15 12:22 8 pgs

Fees: 8.50 Taxes: 0.00



20150319-0023787

STATE OF TENNESSEE
Tre Hargett, Secretary of State
 Division of Business Services
 William R. Snodgrass Tower
 312 Rosa L. Parks AVE, 6th FL
 Nashville, TN 37243-1102

Vanderbilt University Medical Center
 STE D3300MCN
 1161 21ST AVE S
 NASHVILLE, TN 37232-5545

March 18, 2015

Filing Acknowledgment

Please review the filing information below and notify our office immediately of any discrepancies.

SOS Control # :	000792687	Formation Locale:	TENNESSEE
Filing Type:	Nonprofit Corporation - Domestic	Date Formed:	03/18/2015
Filing Date:	03/18/2015 3:00 PM	Fiscal Year Close:	6
Status:	Active	Annual Report Due:	10/01/2015
Duration Term:	Perpetual	Image # :	B0072-0037
Public/Mutual Benefit:	Public		
Business County:	DAVIDSON COUNTY		

Document Receipt

Receipt # : 001913641	Filing Fee:	\$100.00
Payment-Check/MO - Vanderbilt University, NASHVILLE, TN		\$100.00

Registered Agent Address:
 NATIONAL REGISTERED AGENTS, INC.
 STE 2021
 800 S GAY ST
 KNOXVILLE, TN 37929-9710

Principal Address:
 STE D3300MCN
 1161 21ST AVE S
 NASHVILLE, TN 37232-5545

Congratulations on the successful filing of your **Charter** for **Vanderbilt University Medical Center** in the State of Tennessee which is effective on the date shown above. You must also file this document in the office of the Register of Deeds in the county where the entity has its principal office if such principal office is in Tennessee. Please visit the Tennessee Department of Revenue website (apps.tn.gov/bizreg) to determine your online tax registration requirements. If you need to obtain a Certificate of Existence for this entity, you can request, pay for, and receive it from our website.

You must file an Annual Report with this office on or before the Annual Report Due Date noted above and maintain a Registered Office and Registered Agent. Failure to do so will subject the business to Administrative Dissolution/Revocation.

Tre Hargett
 Secretary of State

Processed By: Charmayne Blair

FILED

**CHARTER
OF
VANDERBILT UNIVERSITY MEDICAL CENTER**

Pursuant to the provisions of Section 48-52-102 of the Tennessee Nonprofit Corporation Act (Tennessee Code Annotated §§ 48-51-101 et seq.), as amended from time to time (the “**Tennessee Nonprofit Corporation Act**”), the undersigned corporation, acting through its incorporator, hereby adopts the following Charter:

ARTICLE I

The name of the corporation is Vanderbilt University Medical Center (the “**Corporation**”).

ARTICLE II

The Corporation (i) is a public benefit corporation; (ii) shall not be for profit; (iii) shall not have members; and (iv) is not a religious corporation. It is intended that the Corporation shall have the status of a nonprofit corporation that is exempt from federal income taxation under Section 501(a) of the Internal Revenue Code of 1986, as amended and to include any corresponding provisions of any subsequent federal tax laws (hereinafter, the “**Code**”), as an organization described and operated within the meaning of Section 501(c)(3) of the Code (or in each case, corresponding provisions of any subsequent federal tax laws).

ARTICLE III

(a) The street address and zip code of the Corporation’s initial registered office are 800 South Gay Street, Suite 2021, Knoxville, Tennessee, 37929-9710, and the county in which the initial registered office is located is Knox County. The name of the Corporation’s

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initial registered agent at the Corporation's initial registered office is National Registered Agents, Inc.

(b) The street address and zip code of the Corporation's initial principal office are 1161 21st Avenue South, Suite D3300 MCN, Nashville, Tennessee, 37232-5545, and the county in which the initial principal office is located is Davidson County.

ARTICLE IV

The name, address and zip code of the incorporator of the Corporation are:

NAME

ADDRESS

Audrey J. Anderson

305 Kirkland Hall
Vanderbilt University
Nashville, TN 37240-0001

ARTICLE V

The Corporation's fiscal year shall conclude on June 30 every year.

ARTICLE VI

(a) The purposes for which the Corporation is organized are to operate exclusively for charitable, educational and scientific purposes, within the meaning of Section 501(c)(3) of the Code; and within such limits, and inclusive of such other consistent purposes, as may be set forth in the Bylaws of the Corporation, to: (1) operate, maintain or control one or more academic medical and health science centers, including (but not limited to) related health care, research, and other facilities (which also may be used for biomedical research, administration, and training and education of health care and life sciences professionals), all as may currently exist or as may be established in the future, as part of an integrated, world-class health system affiliated with Vanderbilt University, a Tennessee nonprofit corporation

00072-0038 03/18/2015 3:00 PM Received by Tennessee Secretary of State The Honorable

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(“**Vanderbilt University**”); (2) preserve, promote, and enhance the availability of health care services and scientific advances in public health, in the communities served by the Corporation, by Vanderbilt University, and their respective affiliates and networks; (3) otherwise advance purposes consistent with the general purposes herein and the mission as set forth in the Bylaws; and (4) otherwise fulfill and satisfy the Corporation’s obligations as a party to one or more agreements to be entered into by and among the Corporation, on the one hand, and Vanderbilt University on the other hand, to ensure that the Corporation and Vanderbilt may efficiently and effectively pursue shared interests in health-related research and training.

(b) Subject to the limitations contained in this Charter and the Bylaws and without partisanship of any kind, the Corporation shall be empowered to take all appropriate action in furtherance of the purposes set forth in paragraph (a) of this Article VI and to carry out any activities and exercise all powers available to corporations organized pursuant to the Tennessee Nonprofit Corporation Act that may be carried out by organizations that are described in Section 501(c)(3) of the Code.

(c) The Corporation shall not have or exercise any power or authority either expressly or by interpretation or by operation of law, nor shall it directly or indirectly engage in any activity, (i) that would prevent it from qualifying (and continuing to qualify) as an organization described in Section 501(c)(3) of the Code; (ii) that would prevent it from qualifying (and continuing to qualify) as an organization contributions to which are deductible under Sections 170(c)(2), 2055(a) and 2522(a), as applicable, of the Code; or (iii) that is not available to and may not be carried out by a corporation organized pursuant to the Tennessee Nonprofit Corporation Act.

B0072-0039 03/18/2015 3:00 PM Received by Tennessee Secretary of State The Hatfield Law Firm

FILED**ARTICLE VII**

(a) All powers of the Corporation shall be exercised by or under the authority of, and the affairs of the Corporation shall be managed by or under the direction of, its Board of Directors. The Board of Directors of the Corporation shall exercise all such powers subject to, and in accordance with, the Bylaws of the Corporation. The manner of appointment or election of the members of the Board of Directors shall be set forth in the Bylaws.

(b) Except as otherwise provided in this Charter, the internal affairs of the Corporation shall be governed by, and regulated and determined as provided in, the Corporation's Bylaws.

ARTICLE VIII

In all events and under all circumstances, and notwithstanding merger, consolidation, reorganization, termination, dissolution, or winding up of the Corporation, voluntary or involuntary, or by the operation of law, or upon amendment of this Charter:

(a) No part of the assets or net earnings of the Corporation shall inure to the benefit of or be distributable to its incorporator, directors, officers or other private persons having a personal or private interest in the Corporation, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services actually rendered and to make reimbursement in reasonable amounts for expenses actually incurred in carrying out the purposes set forth in Article VI hereof.

(b) No substantial part of the activities of the Corporation shall consist of the carrying on of propaganda, or of otherwise attempting to influence legislation, unless Section 501(h) of the Code shall apply to the Corporation, in which case the Corporation shall not normally make lobbying or grass roots expenditures in excess of the amounts therein specified.

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The Corporation shall not in any manner or to any extent participate in or intervene in (including the publishing or distributing of statements) any political campaign on behalf of (or in opposition to) any candidate for public office; nor shall it engage in any "prohibited transaction" as defined in Section 503(b) of the Code.

(c) Neither the whole, or any part or portion, of the assets or net earnings of the Corporation shall be used, nor shall the Corporation ever be operated, for objects or purposes other than those set forth in Article VI hereof.

(d) Upon dissolution of the Corporation, all of the Corporation's assets and property of every nature and description remaining after the payment of all liabilities and obligations of the Corporation (but not including assets held by the Corporation upon condition requiring return, transfer, or conveyance, which condition occurs by reason of the dissolution) shall be paid over and transferred to Vanderbilt University, or to one or more organizations as approved in writing by Vanderbilt University, provided that Vanderbilt University or such other approved organization(s) are then qualified for exemption from federal income taxes as organizations described in Section 501(c)(3) of the Code.

ARTICLE IX

The Corporation's Charter may be amended, restated or altered, in whole or in part, by the affirmative vote of at least seventy-five percent (75%) of all of the members of the Corporation's Board of Directors then in office at a duly called meeting at which a quorum is present; provided that (a) at least seven (7) calendar days' notice in writing setting forth a proposed amendment, restatement or alteration of the Corporation's Charter, or a reasonably detailed summary thereof, has first been provided to the Corporation's Board of Directors, and (b) the approval of Vanderbilt University shall be required for any amendment that adversely

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impacts the rights of Vanderbilt University or the VU Directors, as that term is defined in the Corporation's Bylaws.

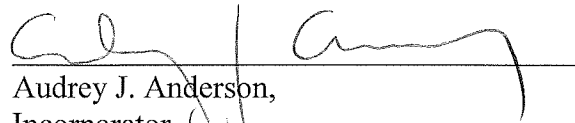
[Signature page follows]

B0072-0042 03/18/2015 3:00 PM Received by Tennessee Secretary of State The Hargett

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IN WITNESS WHEREOF, I have hereunto set my hand and seal this 18 day of

March, 2015.


Audrey J. Anderson,
Incorporator

[Signature Page to Charter]

BM072-0043 03/18/2015 3:00 PM Received by Tennessee Secretary of State Tre Hargett

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI
Attachment 05: Documentation of 501(c)3 Status

Attachment 05: Documentation of 501(c)3 Status

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **MAY 19 2015**

VANDERBILT UNIVERSITY MEDICAL
CENTER
C/O HOWARD S SILVER
HOGAN LOVELLS US LLP
555 13TH ST NW
WASHINGTON, DC 20004

Employer Identification Number:
35-2528741
DLN:
17053089319005
Contact Person:
MS. LEE ID# 31208
Contact Telephone Number:
(877) 829-5500

Accounting Period Ending:
June 30
Public Charity Status:
170(b)(1)(A)(iii)
Form 990 Required:
Yes
Effective Date of Exemption:
March 18, 2015
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 947

-2-

VANDERBILT UNIVERSITY MEDICAL

We have sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

A handwritten signature in cursive script, appearing to read "Tamara J. Spivey".

Director, Exempt Organizations

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI
Attachment 06: A-122 Audit

Attachment 06: A-122 Audit

CONSOLIDATED FINANCIAL STATEMENTS AND
UNIFORM GUIDANCE REPORTS AND SCHEDULE

Vanderbilt University Medical Center
Years Ended June 30, 2023 and 2022
With Reports of Independent Auditors

Ernst & Young LLP



Vanderbilt University Medical Center

Consolidated Financial Statements and Uniform Guidance Reports and Schedule

June 30, 2023 and 2022

Contents

Report of Independent Auditors 1

Consolidated Financial Statements

Consolidated Balance Sheets 4

Consolidated Statements of Operations 5

Consolidated Statements of Changes in Net Assets..... 6

Consolidated Statements of Cash Flows..... 7

Notes to Consolidated Financial Statements..... 8

Supplementary Information

Schedule of Expenditures of Federal Awards and State Financial Assistance 47

Notes to the Schedule of Expenditures of Federal Awards and State Financial Assistance..... 74

Uniform Guidance Reports and Schedule

Report of Independent Auditors on Internal Control Over Financial Reporting and on
Compliance and Other Matters Based on an Audit of Financial Statements Performed
in Accordance With *Government Auditing Standards* 76

Report of Independent Auditors on Compliance for Each Major Federal Program and
Report on Internal Control Over Compliance Required by the Uniform Guidance 78

Schedule of Findings and Questioned Costs..... 81



Ernst & Young LLP
Suite 2100
222 2nd Avenue South
Nashville, TN 37201

Tel: +1 615 252 2000
ey.com

Report of Independent Auditors

Senior Management and the Board of Directors
Vanderbilt University Medical Center

Report on the Audit of the Financial Statements

Opinion

We have audited the consolidated financial statements of Vanderbilt University Medical Center (VUMC), which comprise the consolidated balance sheets as June 30, 2023 and 2022, and the related consolidated statements of operations, changes in net assets and cash flows for the years then ended, and the related notes (collectively referred to as the “financial statements”).

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of VUMC at June 30, 2023 and 2022, and the results of its operations, changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States (*Government Auditing Standards*). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of VUMC and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about VUMC's ability to continue as a going concern for one year after the date that the financial statements are issued.



Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free of material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS and *Government Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of VUMC's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about VUMC's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.



Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. We have not performed any procedures with respect to the audited financial statements subsequent to September 29, 2023. The Schedule of Expenditures of Federal Awards and State Financial Assistance as required by Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* and the *State of Tennessee Audit Manual* is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated September 29, 2023, on our consideration of VUMC's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of VUMC's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering VUMC's internal control over financial reporting and compliance.

Ernst & Young LLP

September 29, 2023, except for our report on the Schedule of Expenditures of Federal Awards and State Financial Assistance for which the date is February 20, 2024

Vanderbilt University Medical Center

Consolidated Balance Sheets

June 30, 2023 and 2022

(\$ in thousands)	2023	2022
Assets		
Current assets:		
Cash and cash equivalents	\$ 679,566	\$ 651,720
Current investments	104,923	255,090
Patient accounts receivable	730,052	658,644
Grants and contracts receivable	148,543	88,793
Inventories	160,134	134,557
Other current assets	88,667	122,903
Total current assets	1,911,885	1,911,707
Restricted cash	95,088	18,662
Noncurrent investments	932,952	773,234
Noncurrent investments limited as to use	165,119	150,925
Property, plant, and equipment, net	1,768,649	1,679,768
Operating lease assets	845,573	826,560
Other noncurrent assets	173,687	166,734
Total assets	<u>\$ 5,892,953</u>	<u>\$ 5,527,590</u>
Liabilities and Net Assets		
Current liabilities:		
Current portion of long-term debt	\$ 23,910	\$ 18,193
Accounts payable and other accrued expenses	473,542	404,059
Medicare accelerated payments	—	15,956
Estimated liabilities under third-party programs	67,022	89,328
Accrued compensation and benefits	345,691	353,270
Current portion of operating lease liabilities	71,906	68,510
Current portion of deferred revenue	8,275	9,494
Current portion of medical malpractice self-insurance reserves	18,414	15,820
Total current liabilities	1,008,760	974,630
Long-term debt, net of current portion	1,854,940	1,728,263
Noncurrent portion of operating lease liabilities	800,003	783,178
Fair value of interest rate exchange agreements	33,157	45,019
Noncurrent portion of medical malpractice self-insurance reserves	72,039	65,816
Noncurrent portion of deferred revenue	758	1,560
Other noncurrent liabilities	9,741	8,856
Total liabilities	<u>3,779,398</u>	<u>3,607,322</u>
Net assets without donor restrictions:		
Net assets without donor restrictions controlled by Vanderbilt University Medical Center	1,774,525	1,631,068
Net assets without donor restrictions related to noncontrolling interests	21,929	20,768
Total net assets without donor restrictions	1,796,454	1,651,836
Net assets with donor restrictions	317,101	268,432
Total net assets	<u>2,113,555</u>	<u>1,920,268</u>
Total liabilities and net assets	<u>\$ 5,892,953</u>	<u>\$ 5,527,590</u>

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

Vanderbilt University Medical Center
Consolidated Statements of Operations
Years Ended June 30, 2023 and 2022

<i>(\$ in thousands)</i>	2023	2022
Operating revenues		
Patient service revenue	\$ 5,871,054	\$ 5,356,273
Academic and research revenue	765,527	705,859
Other operating revenue	224,494	278,736
Total operating revenues	6,861,075	6,340,868
Operating expenses		
Salaries, wages, and benefits	3,697,820	3,304,333
Supplies and drugs	1,533,897	1,378,316
Facilities, equipment, and technology	398,957	364,623
Services and other	921,467	909,783
Depreciation and amortization	191,046	172,999
Interest	66,192	59,930
Total operating expenses	6,809,379	6,189,984
Income from operations	51,696	150,884
Nonoperating revenues and expenses		
Income (loss) from investments	61,043	(71,057)
Gift income	24,977	21,477
Earnings of unconsolidated organizations	3,932	9,392
Unrealized gain on interest rate exchange agreements, net of cash settlements	9,611	25,841
Other nonoperating (losses) gains	(1)	5,957
Total nonoperating revenues and expenses	99,562	(8,390)
Excess of revenues over expenses	151,258	142,494
Excess of revenues over expenses attributable to noncontrolling interests	(8,507)	(8,886)
Excess of revenues over expenses attributable to VUMC	142,751	133,608
Other changes in net assets without donor restrictions		
Change in noncontrolling interests' net assets	1,161	12,429
Net assets released from restriction for capital	984	6,733
Other changes	(278)	(6,756)
Total changes in net assets without donor restrictions	\$ 144,618	\$ 146,014

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

Vanderbilt University Medical Center
Consolidated Statements of Changes in Net Assets
Years Ended June 30, 2023 and 2022

<i>(\$ in thousands)</i>	<u>2023</u>	<u>2022</u>
Net assets without donor restrictions		
Net assets without donor restrictions at the beginning of the period	\$ 1,651,836	\$ 1,505,822
Excess of revenues over expenses	142,751	133,608
Change in noncontrolling interests' net assets	1,161	12,429
Net assets released from restriction for capital	984	6,733
Other changes	(278)	(6,756)
Change in net assets without donor restrictions	<u>144,618</u>	<u>146,014</u>
Net assets without donor restrictions at the end of the period	<u>\$ 1,796,454</u>	<u>\$ 1,651,836</u>
Net assets with donor restrictions		
Net assets with donor restrictions at the beginning of the period	\$ 268,432	\$ 224,558
Contributions	60,412	73,294
Restricted investment income (loss)	6,621	(8,482)
Net assets released from restrictions for operations	(17,232)	(15,697)
Net assets released from restriction for capital	(984)	(6,733)
Other changes	(148)	1,492
Change in net assets with donor restrictions	<u>48,669</u>	<u>43,874</u>
Net assets with donor restrictions at the end of the period	<u>\$ 317,101</u>	<u>\$ 268,432</u>
Total net assets		
Beginning of the period	\$ 1,920,268	\$ 1,730,380
Change in total net assets	<u>193,287</u>	<u>189,888</u>
End of the period	<u>\$ 2,113,555</u>	<u>\$ 1,920,268</u>

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

Vanderbilt University Medical Center
Consolidated Statements of Cash Flows
Years Ended June 30, 2023 and 2022

(\$ in thousands)	2023	2022
Cash flows from operating activities		
Change in total net assets	\$ 193,287	\$ 189,888
Adjustments to reconcile change in total net assets to net cash provided by operating activities:		
Depreciation and amortization	191,046	172,999
Gain on acquisition of equity method investment	—	(14,669)
Investment (gains) losses	(19,371)	102,832
Purchases of trading securities	(269,291)	(289,027)
Sales of trading securities	301,430	306,081
Unrealized gain on interest rate exchange agreements	(11,862)	(31,845)
Implementation costs incurred on hosting arrangements	(23,609)	(18,108)
Restricted contributions for endowments and property, plant, and equipment	(24,745)	(24,323)
Noncash lease expense	74,080	76,325
Other noncash activities	(4,827)	(2,805)
(Decrease) increase in cash due to changes in:		
Patient accounts receivable	(71,408)	(102,805)
Accounts payable and other accrued expenses	54,493	51,693
Medicare accelerated payments	(15,956)	(174,428)
Other assets and other liabilities, net	(120,195)	(42,617)
Net cash provided by operating activities	253,072	199,191
Cash flows from investing activities		
Purchases of property, plant, and equipment	(255,779)	(213,532)
Acquisition of additional investment interest	—	(7,660)
Purchases of long-term securities	(377,616)	(399,028)
Sales and maturities of long-term securities	341,536	221,191
Proceeds on sale of property, plant, and equipment	54	—
Net cash used in investing activities	(291,805)	(399,029)
Cash flows from financing activities		
Proceeds from issuance of long-term debt	148,725	361,666
Debt issuance costs	(917)	(3,160)
Repayment of long-term debt and lines of credit	(11,576)	(359,292)
Principal payments under finance lease obligations	(10,626)	(7,333)
Restricted contributions for endowments and property, plant, and equipment	24,745	24,323
Distributions to noncontrolling interests	(7,346)	(10,700)
Net cash provided by financing activities	143,005	5,504
Net change in cash, cash equivalents, and restricted cash	104,272	(194,334)
Cash, cash equivalents, and restricted cash		
Beginning of the period	670,382	864,716
End of the period	\$ 774,654	\$ 670,382

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

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

1. Description of Organization

Vanderbilt University Medical Center ("VUMC") is a Tennessee not-for-profit corporation incorporated in March of 2015 to operate an academic medical center including a comprehensive research, teaching, and patient care health system (the "Medical Center"). Until April 29, 2016, the Medical Center operated as a unit within Vanderbilt University (the "University" or "VU"), as a part of the University's administrative structure, with the same governing board, legal, financial, and other shared services. VUMC began operations effective April 30, 2016, following the closing of the sale of the Medical Center by the University (the "Acquisition").

VUMC owns and operates three hospitals located on the main campus ("Medical Center Main Campus" or "MCMC") of the University in Nashville, Tennessee: Vanderbilt University Hospital ("VUH"), Monroe Carell Junior Children's Hospital at Vanderbilt ("MCJCHV"), and Vanderbilt Psychiatric Hospital ("VPH"). In addition, VUMC partially owns Vanderbilt Stallworth Rehabilitation Hospital ("VSRH"), also located on the main campus of the University, through a joint venture with Encompass Health Corp. in which VUMC holds a 50% interest, including a 1% interest held by Vanderbilt Health Services, LLC, ("VHS"), a VUMC wholly owned subsidiary. Effective August 1, 2019, VUMC acquired from Community Health Systems, Inc. ("CHS"): Tennova Healthcare – Lebanon, now known as Vanderbilt Wilson County Hospital ("VWCH"). Effective January 1, 2021, VUMC acquired from CHS: Tennova Healthcare – Shelbyville and Tennova Healthcare – Harton, now known as Vanderbilt Bedford Hospital ("VBCH") and Vanderbilt Tullahoma-Harton Hospital ("VTHH"), respectively. At the same time as the acquisition of VBCH and VTHH, VUMC acquired a noncontrolling ownership interest in CHS's affiliated Tennova Healthcare – Clarksville ("VMH"). VUH, MCJCHV, VPH, VWCH, VBCH, and VTHH are licensed for 1,661 beds, and VSRH is licensed for 80 beds.

VUMC consists of two major operating divisions and an administrative overhead division. The operating divisions include the Clinical Enterprise and Academic Enterprise divisions. The administrative overhead division is referred to as Medical Center Administration ("MCA").

The Clinical Enterprise division includes the professional clinical practice revenues and related expenses of the Vanderbilt Medical Group ("VMG"), and technical revenues and associated expenses for the operation of VUMC's hospitals and clinic facilities, including VUH, MCJCHV, VPH, VWCH, VBCH, and VTHH. The Clinical Enterprise also includes VHS.

- VUH is a quaternary care teaching hospital licensed for 790 acute care and specialty beds. VUH, a Level I trauma center, provides advanced patient care and serves as a key site for medical education and clinical research conducted by physician faculty. VUH includes a comprehensive burn center, the Vanderbilt Transplant Center, the Vanderbilt Heart and Vascular Institute, and the Vanderbilt Ingram Cancer Center. Effective April 5, 2023, VUMC was approved to increase its total permanent licensed bed capacity by 46 beds. On May 10, 2023, VUMC sunset the remaining 113 beds from the temporary license provided under the Board for Licensing Health Care Facilities ("BLHCF") Policy 82 response to COVID-19 (which was comprised of 20 observation beds and 93 double occupancy beds).
- MCJCHV is a pediatric quaternary care teaching hospital licensed for 325 beds (144 acute and specialty, 65 pediatric intensive care, and 116 neonatal intensive care). MCJCHV is the region's only full-service pediatric hospital, with over 30 pediatric specialties. MCJCHV serves as a site for medical education and clinical research conducted by pediatric physician faculty, houses the only Level IV neonatal intensive care center and the only Level I pediatric trauma center within the region, and is a regional referral center for extracorporeal membrane oxygenation (heart and lung failure).

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

- VPH is a psychiatric hospital licensed for 106 beds and provides inpatient care to pediatric, adolescent, adult, and geriatric patients. Also, VPH provides partial hospitalization programs to both adult and adolescent patients, psychiatric assessment services, adult intensive outpatient programs, pediatric and adult ambulatory outpatient treatment, and neuromodulation procedures through electroconvulsive therapy and transcranial magnetic stimulation.
- VWCH is a 245 licensed bed acute care facility and is a substantial provider of both inpatient and outpatient medical services in Lebanon, Tennessee. Services offered include an accredited chest pain center, a stroke center, a comprehensive weight loss center, a comprehensive total joint program for orthopedics, and a provisional Level III trauma center. In addition, Vanderbilt Ingram Cancer Center extended services to this campus in 2020, and it includes a state-of-the-art linear accelerator.
- VBCH is a 60 licensed bed, Joint Commission-accredited hospital, which offers a range of inpatient and outpatient medical and surgical services, along with urgent care services.
- VTHH is a 135 licensed bed Joint Commission-accredited hospital, which offers a full range of inpatient and outpatient surgical and specialty services including interventional cardiology, orthopedics, urology, a sleep center, cardiac rehabilitation, and physical rehabilitation. The hospital also features an accredited Chest Pain Center.
- VMG is the practice group of physicians and advanced practice practitioners employed by VUMC, many of whom, when appropriate and required, have faculty appointments from the University, who perform billable professional medical services. VMG is not a separate legal entity. VMG has a board which consists of the VUMC clinical service chiefs, who also serve as clinical department chairs. Under the oversight of VUMC executive leadership, VMG sets professional practice standards, bylaws, policies, and procedures. VUMC bills for services rendered by VMG clinicians in both inpatient and outpatient locations. Collected fees derive a component of each VMG clinician's compensation. VMG includes nationally recognized physicians whose expertise spans the spectrum from primary care to the most specialized quaternary discipline. VMG members are "board certified" or eligible for board certification, as required by bylaws. All VMG members are re-credentialed every two years in accordance with the Centers for Medicare and Medicaid Services, The Joint Commission, and the National Committee for Quality Assurance Standards. Most of the specialties and subspecialties currently recognized by the various national specialty boards are represented in VMG.
- VHS serves as a holding company for 16 first tier health care related subsidiaries and joint ventures owned with various entities, including, but not limited to, VSRH, Vanderbilt Integrated Providers ("VIP") and the Vanderbilt Health Affiliated Network ("VHAN"). VHS operations primarily consist of community physician practices, walk-in and retail health clinics, imaging services, outpatient surgery centers, radiation oncology centers, a home health care agency, a home infusion and respiratory service, an affiliated health network, accountable care organizations, and a rehabilitation hospital. VIP employs providers and staff located off the main VUMC campus and affiliates with or purchases and operates physician practices in the region. VHAN contracts with other healthcare providers, including hospitals, physicians, and physician groups to jointly develop and implement a clinical integration program through a clinically integrated network of physicians and hospitals. These subsidiaries of VHS include clinics managed in multiple outpatient locations throughout middle Tennessee and southwestern Kentucky.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

- Health Professional Solutions, LLC (“HPS”) is a holding company that holds interest in four VUMC subsidiaries that engage in or support various health care related activities in order to improve the quality and availability of health care services in the community. These subsidiaries include businesses focused on pharmacy, supply chain, and clinically integrated support services.
- Nashville Biosciences, LLC (“NashBio”) operates exclusively in support of VUMC’s non-academic medical research activities. NashBio deploys the biospecimens and genomic data and de-identified medical records of VUMC known as “BioVU”, along with other information, to provide commercial services and products to life science industry customers in connection with pharmaceutical, biotechnology, and medical research and development activities.

The Academic Enterprise division includes all research, research-support activities, and faculty endeavors supporting post-graduate training programs. A significant funding source for VUMC’s research has historically been the federal government. Federal funding is received from the Department of Health and Human Services, the Department of Defense, the National Science Foundation, and other federal agencies. Sponsored research awards, including multi-year grants and contracts from government sources, foundations, associations, and corporations signify future research commitments. Also, core activities supporting research, including advanced computing and grant administration, are included in this division.

VUMC has entered into debt agreements further discussed below. Certain of these debt agreements contain required disclosures outlining annual and quarterly reporting requirements. In addition, certain of these debt agreements require notices of the occurrence of significant events which include but are not limited to delinquencies, bond calls, rating changes, bankruptcies, and mergers or acquisitions. The Obligated Group includes the wholly-owned hospitals located on the MCMC along with all associated on-campus and off-campus ambulatory clinics, the Academic Enterprise, MCA, VWCH, and VMG.

The terms “Company,” “VUMC,” “we,” “our,” or “us” as used herein and unless otherwise stated or indicated by context refer to Vanderbilt University Medical Center and its affiliates. The terms “facilities” or “hospitals” refer to entities owned and operated by VUMC and its affiliates, and the term “employees” refers to employees of VUMC and its affiliates.

VUMC operates on a fiscal year which ends on June 30. The term “Fiscal” preceding a year refers to a particular VUMC fiscal year.

2. Summary of Significant Accounting Policies

Basis of Presentation

The accompanying consolidated financial statements have been prepared on the accrual basis in accordance with accounting principles generally accepted in the United States of America (“U.S. GAAP”). Based on the existence or absence of donor-imposed restrictions, VUMC classifies resources into two categories: net assets without donor restrictions and net assets with donor restrictions.

Principles of Consolidation

The consolidated financial statements include the accounts of VUMC and its wholly owned, majority-owned, and controlled organizations. Noncontrolling interests in less-than-wholly owned consolidated subsidiaries of VUMC are presented as a component of net assets to distinguish between the interests of VUMC and the interests of the noncontrolling owners. All material intercompany transactions and account balances among the various entities have been eliminated.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

VUMC uses the equity method to account for its interests in unconsolidated partnerships, joint ventures, and limited liability entities over which it exercises significant influence. Investment carrying amounts are adjusted for VUMC's share of investee earnings or losses based on percentage of ownership. Distributions received from unconsolidated entities that represent returns on VUMC's investment (i.e., dividends) are reported as cash flows from operating activities in VUMC's consolidated statements of cash flows.

Use of Estimates

The preparation of consolidated financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect amounts reported in the consolidated financial statements and accompanying notes. These estimates affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the consolidated balance sheets and the reported amounts of revenues and expenses during the reporting periods. Actual results ultimately could differ from those estimates.

Cash and Cash Equivalents

Cash and cash equivalents are liquid assets with minimal interest rate risk and maturities of three months or less when purchased. VUMC invests operating assets in a diversified manner. At times, VUMC may have cash and cash equivalents at a financial institution in excess of federally insured limits, and therefore, bears a risk of loss. Certain cash and cash equivalents are included in investments and restricted cash on the consolidated balance sheets.

Liquidity and Availability

As of June 30, 2023, VUMC has \$2,447.6 million of financial assets available within one year of the balance sheet date to meet cash needs for general expenditures consisting of cash and cash equivalents of \$679.6 million, patient accounts receivable of \$730.1 million, and unrestricted investments of \$1,037.9 million. As of June 30, 2022, VUMC had \$2,338.6 million of financial assets available within one year of the balance sheet date to meet cash needs for general expenditures consisting of cash and cash equivalents of \$651.7 million, patient accounts receivable of \$658.6 million, and unrestricted investments of \$1,028.3 million. None of these financial assets are subject to donor or other contractual restrictions that make them unavailable for general expenditures within one year of the balance sheet date.

VUMC has a policy to structure its financial assets to be available as its general expenditures, liabilities, and other obligations come due. In addition, as part of its liquidity management, VUMC invests cash in excess of daily requirements in various short-term investments, including certificates of deposit and short-term treasury instruments.

As more fully described in Note 11 Long-Term Debt, VUMC also has committed lines of credit in the amount of \$300 million, which it could draw upon in the event of an unanticipated liquidity need, with no amount drawn as of June 30, 2023 or June 30, 2022.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

Revenue Recognition – Patient Services

VUMC contracts with patients to provide healthcare services that are tailored to each patient's medical needs and health conditions. VUMC recognizes patient service revenue over time as performance obligations are ultimately satisfied. Performance obligations related to inpatient services are generally satisfied as the healthcare services are rendered to the patient, which generally begins at the time of patient admission and extends through the time of patient discharge. Performance obligations for outpatient services are generally satisfied on the same day that services are rendered to the patient. VUMC uses a portfolio approach consisting of major payor classes to account for categories of patient contracts as a collective group rather than recognizing revenue on an individual contract basis. Based on historical collection trends and other analysis, VUMC believes that revenue recognized by utilizing the portfolio approach approximates the revenue that would have been recognized if an individual contract approach were used.

Patient service revenue is recognized on an accrual basis using a best estimate of the transaction price for the type of service rendered to the patient. The transaction price ultimately represents the estimated amount to be received from the patient and third-party payors in exchange for the services rendered by VUMC. VUMC estimates the transaction price based on standard charges, reduced for estimated price concessions. The price concessions include items that are explicit, such as contractual adjustments provided to third-party payors and discounts provided to uninsured and underinsured patients in accordance with VUMC policy, and also implicit in nature, such as the estimated uncollectible amounts from uninsured or underinsured patients. VUMC regularly reviews transactional data for the major revenue categories to evaluate the reasonableness of the transaction price, including any price concessions, and takes into consideration recent experience by payor category and payor agreement rate changes among other factors.

VUMC carries the value of the related patient accounts receivable balances at the transaction price, inclusive of all estimated price concessions. Given the complexities involved in determining amounts ultimately due to VUMC under reimbursement arrangements with third-party payors, which are often subject to interpretation, VUMC may receive reimbursement for healthcare services authorized and provided that differs from these estimates. If actual results differ from these estimates, a change in estimate will be recorded in the period the change is identified and such differences could be material.

VUMC has elected to apply the optional exemption provided in the Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 606-10-50-14 as substantially all of its performance obligations relate to contracts with a duration of less than one year. Therefore, VUMC is not required to disclose the aggregate amount of the transaction price allocated to performance obligations that are unsatisfied or partially satisfied at the end of the reporting period. Unsatisfied or partially satisfied performance obligations are primarily related to in-house patients at the end of the reporting period. The performance obligations for these contracts are generally completed when the patient is discharged, which is typically within a week.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

In addition to reimbursement received in fee-for-service arrangements, VUMC participates in certain federal healthcare programs, as well as state and commercial payor programs, through which VUMC may be entitled to additional payments. These arrangements are complex and may extend over multiple accounting periods. The arrangements are subject to the interpretation of federal and state-specific reimbursement rules, new or changing legislation, and final cost report settlements. Any changes to reimbursement rules or the introduction of new or changing legislation could impact levels and timing of reimbursements received from these programs. As a participant in these programs, VUMC is also required to meet certain financial reporting requirements which include the filing of an annual cost report for each hospital. Each annual cost report is also subjected to an audit performed by the regulatory agency and may extend several years before ultimate settlement becomes known. Therefore, determining the actual amounts earned under these programs involves judgement and estimates that may extend into future periods. These estimates are frequently evaluated and subsequently may be adjusted based on new developments or the receipt of new information related to these settlements. If actual results vary from these estimates, a change in estimate will be recorded in the period the change is identified and such differences could be material.

VUMC provides care to patients who meet the criteria for charity care under its financial assistance policy for no payment or at payment amounts less than its established charge rates. VUMC does not recognize the charges that qualify as charity care as revenue because VUMC does not pursue collection of these amounts.

Revenue Recognition – Non-Patient Services

Revenue for non-patient services is recognized at an amount that reflects the consideration VUMC expects to be entitled in exchange for providing goods or services. The amounts recognized reflect considerations due from customers, the U.S. government, and others, and is recognized as performance obligations are satisfied. Primary categories of non-patient revenue include academic and research revenue as well as other miscellaneous activities as further described in Note 8 Other Relevant Financial Information.

VUMC receives funding through grants and contracts issued by departments and agencies of the U.S. government, industry, and other foundation sponsors who restrict the use of such funds to academic and research purposes. VUMC recognizes revenue from these grants and contracts in accordance with contract terms, as defined in the agreements governing that funding. VUMC recognizes facilities and administrative ("F&A") costs recovery as revenue when the allowable expenditure is incurred on the associated grant or contract. This activity represents reimbursement, primarily from the federal government, of F&A costs on sponsored activities.

Grants and contracts receivable include amounts due from these sponsors of externally funded research. These amounts have been billed or are billable to the sponsor and are recorded at the amount that reflects the consideration VUMC expects to receive.

Deferred Revenue

Deferred revenue is recorded for funds received in advance. The related revenue is recognized when the performance obligations have been met.

Gift Income and Pledges

VUMC recognizes unconditional promises to give cash and other assets, referred to as pledges, as gift income at fair value when the pledge is received. Conditional promises to give are recognized as pledges once the conditions are substantially met. Pledges are recognized as net assets with donor restrictions. Gifts received with donor stipulations limiting the use of the donated assets are reported as net assets with donor restrictions. Donor-restricted contributions whose restrictions are met within the same year as received are reported as gift income in the consolidated statements of operations.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

Gift income is recognized when a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished. Gifts of cash or other assets that must be used to acquire long-lived assets are reported as net assets with donor restrictions until the assets are placed in service, at which point they are reclassified to net assets without donor restrictions.

Pledges receivable are reported net of allowances for uncollectible amounts based on an analysis of past collection experience and other judgmental factors. Pledges receivable are included in other current or other noncurrent assets in the consolidated balance sheets based on the expected timing of cash flows. VUMC discounts the noncurrent portion of pledges receivables at a rate commensurate with the scheduled timing of receipt. VUMC applied annual discount rates ranging from 0.5% to 1.5% to amounts outstanding as of June 30, 2023 and 2022.

Concentrations of Risk

VUMC grants unsecured credit to its patients, primarily residing in Nashville, Tennessee and the surrounding areas of middle Tennessee, most of whom are insured under commercial, Medicare (both traditional fee-for-service and Managed Medicare), or TennCare agreements. Medicare, Blue Cross Blue Shield ("BCBS"), and TennCare (which includes BCBS of Tennessee, United, and Amerigroup) represent VUMC's significant concentrations of credit risk from payors.

The collection of revenue and accounts receivables from Medicare, TennCare, Blue Cross, other third-party payors, and patients is a significant source of operating cash flow. The payor composition of patient service revenue and related accounts receivable portfolio may fluctuate from time to time and generally correlate to the prevailing economic conditions, such as periods of economic expansion or recession or changes in unemployment levels, and those fluctuations may impact the realization of patient service revenue and collectability of accounts receivable. Other factors such as unexpected disruptions to business office operations or trends in federal or state governmental and private employer healthcare coverage could affect the ultimate collectability of accounts receivable balances. As a result, VUMC may be exposed to gains or losses in future periods that could affect the financial position and operating cash flows of the organization and may be material to its financial position, operating income and cash flow from operations.

Inventories

VUMC reports inventories at the lower of cost or market, with cost being determined on the first-in, first-out method. Inventories consist primarily of medical supplies, surgical implants, and pharmaceuticals.

Restricted Cash

VUMC reports cash whose use is restricted at cost, which approximates fair value. The cash is primarily restricted for use in purchasing and constructing property, plant, and equipment and restricted cash associated with our self-insurance trust.

Investments

VUMC reports investments held at fair value in the consolidated balance sheets. Private equity investments, multi-strategy hedge funds, real estate mutual funds, and hedged equity funds are reported based on net asset value ("NAV"), provided by the respective fund manager, as a practical expedient to estimate fair value. VUMC records purchases and sales of securities on the trade dates, and realized gains and losses are determined based on the average historical cost of the securities sold. Interest income is recorded on the accrual basis and dividend income is recorded on the ex-dividend date. VUMC reports net receivables and payables arising from unsettled trades as a component of investments.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

Property, Plant, and Equipment, Net

VUMC records purchases of property, plant, and equipment at cost and expenses repairs and maintenance costs as incurred. VUMC capitalizes interest cost incurred on borrowed funds during the period of construction of capital assets as a component of the cost of acquiring those assets. VUMC capitalizes donated assets at fair value on the date of donation.

Capitalized software for internal use is recorded during the application development stage. These costs include fees paid to third parties for direct costs of materials and services consumed in developing or obtaining the software; payroll related costs and capitalized interest costs. Costs for training and application maintenance in the post-implementation operation stage are expensed as incurred.

VUMC computes depreciation using the straight-line method over the estimated useful life of land improvements (5 to 18 years), buildings and leasehold improvements (2 to 40 years), and equipment (2 to 20 years). Equipment costs also include capitalized internal use software costs, which are expensed over the expected useful life, which is generally 3 to 12 years.

Software for internal use is amortized on a straight-line basis over its estimated useful life. In determining the estimated useful life, management considers the effects of obsolescence, technology, competition, contract term, other economic factors, and rapid changes that may be occurring in the development of software products, operating systems, and computer hardware. Amortization begins once the software is ready for its intended use.

Costs Associated with Hosting Arrangements under Service Contracts

Costs associated with hosting arrangements under service contracts are presented in other noncurrent assets on our consolidated balance sheets. These assets total \$40.7 million and \$18.1 million as of June 30, 2023 and June 30, 2022, respectively. The related capitalization policy is consistent with the policy described above for internal use software. Once placed into service, these assets will be amortized over the term of the associated subscription agreement. These assets largely consist of costs associated with the implementation of an enterprise resource planning system, which was placed into service in April 2023.

Impairment of Long-Lived Assets

VUMC reviews long-lived assets, such as property, plant, and equipment, for impairment whenever events or changes in circumstances indicate that the carrying amount of an asset may not be recoverable. VUMC measures the recoverability of assets to be held and used by comparing the carrying amount of an asset to estimated undiscounted future cash flows expected to be generated by the asset. If the carrying amount of an asset exceeds its estimated future cash flows, VUMC recognizes an impairment charge to the extent the carrying amount of the asset exceeds its fair value.

Conditional Asset Retirement Costs and Obligations

VUMC recognizes the estimated fair value of liabilities for existing legal obligations to perform certain activities, primarily asbestos removal, in connection with the retirement, disposal, or abandonment of assets. These liabilities are included in other noncurrent liabilities on the consolidated balance sheets and total \$7.2 million and \$7.0 million as of June 30, 2023 and 2022, respectively. VUMC measures these liabilities using estimated cash flows with an inflation rate applied of 3.0% as of June 30, 2023 and 2022. VUMC discounts those cash flow estimates at a credit-adjusted, risk-free rate, which ranged from 2.9% to 4.2% as of June 30, 2023 and 2022, and adjusts these liabilities for accretion costs and revisions in estimated cash flows.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

Long-Term Debt

The carrying value of VUMC's debt is the par amount adjusted for the net unamortized amount of debt issuance costs and bond premiums and discounts.

Interest Rate Exchange Agreements

VUMC reports interest rate exchange agreements at fair value, which is determined to be the present value of future net cash settlements that reflect market yields as of the measurement date and estimated amounts that VUMC would pay, or receive, to terminate the contracts as of the report date. VUMC considers current interest rates and creditworthiness of the interest rate exchange counterparties when estimating termination settlements.

Self-Insurance Reserves

VUMC elects to self-insure a portion of its medical malpractice, professional, and general liability coverage via an irrevocable self-insurance trust. For Fiscal 2023 and 2022, the maximum annual self-insurance retention was \$6.0 million per occurrence, up to \$46.0 million in the aggregate. Actuarial firms assist management in estimating expected losses on an annual basis, at which time VUMC records medical malpractice, professional, and general liability expense within the limits of the program. These liabilities are classified as current or noncurrent based on the expected timing of cash flows and are measured at the net present value of those cash flows using a discount rate of 2.5% as of June 30, 2023 and 2022. For both Fiscal 2023 and 2022, VUMC obtained excess medical malpractice, professional, and general liability coverage from commercial insurance carriers for claims exceeding the retention limits, up to \$175.0 million. These policies would also provide coverage up to \$175.0 million if any claims in the aggregate exceeded the retention limits.

VUMC also elects to self-insure for employee health and workers' compensation expenses. Actuarial firms assist management in estimating expected losses on an annual basis. The maximum retention for workers' compensation was \$0.8 million per occurrence for both Fiscal 2023 and 2022. There is no stop loss insurance on health plan claims.

Income Taxes

VUMC is a tax-exempt organization as described in Section 501(c)(3) of the Internal Revenue Code (the "Code") and is generally exempt from federal income taxes under Section 501(a) of the Code.

Excess of Revenues Over Expenses

The consolidated statements of operations include excess of revenues over expenses as a performance indicator. Excess of revenues over expenses includes all changes in net assets without donor restrictions, except for changes in noncontrolling interest holders' share of consolidated entities, net assets released from restrictions used for capital, and certain other items.

Statement of Cash Flows

For VUMC's consolidated statements of cash flows, cash, cash equivalents, and restricted cash is defined as those amounts included in the cash and cash equivalents caption and restricted cash caption on the consolidated balance sheets.

Reclassifications

Certain reclassifications have been made to the Fiscal 2022 consolidated financial statements to conform to the Fiscal 2023 presentation. The reclassifications had no effect on net assets or changes in net assets as previously reported.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

Recent Accounting Pronouncements

Periodically, the FASB issues Accounting Standards Updates (“ASUs”) that may impact the recognition, measurement, and presentation of balances and activity in VUMC’s consolidated financial statements or the disclosures contained within those statements. As part of preparing consolidated financial statements, VUMC evaluates the effects of the ASUs and applies the updated guidance within the required effective dates.

Not Yet Adopted

- In June, 2016, the FASB issued ASU 2016-13, Financial Instruments – Credit Losses (Topic 326). This ASU introduced a new model for recognizing credit losses on financial instruments based on an estimate of the current expected credit losses. The new current expected credit losses, or CECL, model generally calls for the immediate recognition of all expected credit losses and applies to financial instruments and other assets, including accounts receivable and other financial assets measured at amortized cost, debt securities and other financial assets. The ASU is effective for fiscal years beginning after December 15, 2022. VUMC is currently assessing the impact of this ASU on the consolidated financial statements.

3. Related Parties

On April 29, 2016, VUMC acquired the assets, liabilities, rights, and obligations of the clinical enterprise, postgraduate medical training programs, and clinically related research of the University’s owned and operated Medical Center through the Acquisition.

The assets acquired and liabilities assumed from the Acquisition were detailed in a Master Transfer and Separation Agreement (“MTSA”). The MTSA contains the framework for the ongoing economic relationship between VUMC and the University. The relationship is memorialized in the form of an Academic Affiliation Agreement (“AAA”), a Trademark License Agreement (“TMLA”), a Ground Lease, and a Reciprocal Master Services Agreement (“MSA”). The agreements are described below.

- The AAA outlines the ongoing academic, research, and clinical affiliation between the University and VUMC for all the University’s degree-granting, certificate, and research programs. The AAA allocates responsibility between the University and VUMC for jointly administered research and academic programs and is an exclusive agreement between VUMC and VU requiring VUMC to be organized, governed, and operated in a manner that supports VU’s academic and research mission. The agreement provides that VU will be the exclusive academic affiliate of VUMC, and VUMC will be the exclusive clinical affiliate of VU.

The AAA requires VUMC to pay VU an annual fee in equal monthly payments adjusted annually for inflation based upon the Biomedical Research and Development Price Index (“BRDPI”) in perpetuity under certain mutually agreed-upon termination or default clauses. During Fiscal 2023 and 2022, VUMC recorded operating expense totaling \$81.4 million and \$79.8 million, respectively, in connection with fees due under the AAA.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

- Under the TMLA, VU grants, subject to certain consents and approvals, a perpetual license to use various VU-owned licensed marks in connection with VUMC's fundamental activities after the Acquisition date. The licensed marks, which VUMC continues to use as its primary brands, include virtually all those previously in use by VUMC. This agreement requires VUMC to pay VU royalties consisting of a monthly payment equal to 1% of all operating revenue of VUMC and 15% of income from operations. During Fiscal 2023 and 2022, VUMC recorded operating expense totaling \$77.5 million and \$88.0 million, respectively, in connection with the 1% of operating revenue and 15% of operating income payments due under the TMLA. Also, VUMC is required to pay in equal monthly installments an annual TMLA base fee royalty, which increases 3% annually, but is also reduced by the amount of principal payments made under a subordinated note discussed in Note 11 Long-Term Debt (the "Fixed TMLA Royalty Payment"). During Fiscal 2023 and 2022, VUMC recorded operating expense totaling \$68.8 million and \$66.6 million, respectively, in connection with this base fee royalty. In Fiscal 2018, VU sold its rights to future base fee royalty payments to a third party. In Fiscal 2019, VU sold its rights to future 1% of operating revenue payments to a third party. The TMLA is in force in perpetuity under certain mutually agreed-upon termination or default clauses.
- The Ground Lease is an agreement between VU and VUMC that allows VUMC to use the land on which VUMC's campus and related buildings are located. The initial term of the Ground Lease ends June 30, 2114, with the option to extend the lease for two additional terms of up to 50 to 99 years each with agreement between VU and VUMC. The lease covers 1.7 million square feet or 38.75 acres of space, payable monthly and CPI adjusted annually. During Fiscal 2023 and 2022, VUMC recorded operating expense totaling \$22.1 million and \$20.4 million, respectively, in connection with fees due under the Ground Lease.
- The University and VUMC provide services to one another for agreed-upon consideration as outlined in the MSA. VU provides services to VUMC, such as information technology infrastructure support, utilities, and law enforcement staffing. VUMC provides various operational services for the University, such as a student health clinic and animal care. Additionally, the MSA encompasses an Employee Matters Agreement ("EMA") and specific Employee Service Agreements ("ESAs"). The EMA and ESAs govern employee transactions and ongoing sharing between VU and VUMC in various capacities, such as research, teaching, clinical, and other administrative services. Services under the MSA can be terminated by either party subject to predetermined cancellation notification periods. In connection with the MSA, during Fiscal 2023 and 2022, VUMC recognized revenue totaling \$48.6 million and \$44.5 million, respectively, and recorded operating expense totaling \$128.6 million and \$121.2 million, respectively.
- Also, as part of the Acquisition, VUMC issued to VU a \$100.0 million subordinated promissory note payable, which is further described in Note 11 Long-Term Debt, with a balance of \$64.6 million as of June 30, 2023, and \$69.6 million as of June 30, 2022. VU sold its rights to future principal and interest payments on this note to a third party.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

The impact of these agreements in the consolidated statements of operations during Fiscal 2023 and 2022 is as follows:

<i>(\$ in thousands)</i>	2023	2022
Academic and research revenue	\$ 18,321	\$ 13,540
Other operating revenue	30,315	30,958
Total operating revenues	<u>\$ 48,636</u>	<u>\$ 44,498</u>
Operating expenses		
Salaries, wages, and benefits	\$ 9,636	\$ 9,111
Facilities and equipment	66,435	58,610
Services and other	302,326	308,290
Interest	2,174	2,336
Total operating expenses	<u>\$ 380,571</u>	<u>\$ 378,347</u>

Other current assets include amounts receivable from VU, which totaled \$6.2 million as of June 30, 2023, and \$7.0 million as of June 30, 2022. Accounts payable and other accrued expenses include amounts payable to related parties, which totaled \$47.7 million and \$58.5 million as of June 30, 2023 and 2022, respectively.

In the normal course of business, members of VUMC's Board of Directors or VUMC employees may be directly or indirectly associated with companies engaged in business activities with VUMC. VUMC has a written conflict of interest policy that requires, among other things, that members of the VUMC community (including trustees) may not review, approve, or administratively control contracts or business relationships when (i) the contract or business relationship is between VUMC and a business in which the individual or a family member has a material financial interest, or (ii) the individual or a family member is an employee of the business and is directly involved with activities pertaining to VUMC.

Furthermore, VUMC's conflict of interest policy extends beyond the foregoing business activities in that disclosure is required for any situation in which an applicable individual's financial, professional, or other personal activities may directly or indirectly affect, or have the appearance of affecting, an individual's professional judgment in exercising any VUMC duty or responsibility, including the conduct or reporting of research.

The policy extends to all individual members of the VUMC community (including Board of Directors, VUMC officials, full-time, part-time, temporary faculty and staff). Each applicable person is required to certify compliance with the conflict of interest policy on an annual basis. This certification includes specifically disclosing whether VUMC conducts business with an entity in which he or she (or an immediate family member) has a material financial interest, as well as any other situation that could appear to present a conflict with VUMC's best interests.

When situations exist relative to the conflict of interest policy, VUMC takes active measures to appropriately manage the actual or perceived conflict in the best interests of VUMC, including periodic reporting of measures taken to the Audit and Compliance Committee of the Board of Directors.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

4. Patient Service Revenue, Patient Accounts Receivable, and Estimated Third-Party Settlements

The sources of patient service revenue by payor for Fiscal 2023 and 2022 are as follows:

(\$ in thousands)	2023	2022
Other third-party payors, primarily commercial carriers	\$ 3,533,047	\$ 3,307,671
Medicare/Managed Medicare	1,438,645	1,262,330
TennCare/Medicaid	834,073	724,030
Uninsured (self-pay)	65,289	62,242
	<u>\$ 5,871,054</u>	<u>\$ 5,356,273</u>

Patient accounts receivable comprise amounts due from the following sources as of June 30, 2023 and 2022:

(\$ in thousands)	2023	2022
Medicare/Managed Medicare	\$ 125,031	\$ 119,626
TennCare/Medicaid	97,767	87,357
Blue Cross	153,521	134,528
Other third-party payors, primarily commercial carriers	293,197	260,034
Patient responsibility ⁽¹⁾	60,536	57,099
Patient accounts receivable	<u>\$ 730,052</u>	<u>\$ 658,644</u>

⁽¹⁾ Includes self-pay after insurance.

Estimated third-party settlements by major payor category as of June 30, 2023 and 2022 are as follows:

(\$ in thousands)	2023	2022
Receivables under third-party programs		
Tricare/Champus ⁽¹⁾	\$ 5,230	\$ 5,338
Total receivables under third-party programs	<u>\$ 5,230</u>	<u>\$ 5,338</u>
Liabilities under third-party programs		
TennCare/Medicaid	\$ 56,997	\$ 88,296
Medicare ⁽¹⁾	15,255	6,370
Total liabilities under third-party programs	<u>\$ 72,252</u>	<u>\$ 94,666</u>

⁽¹⁾ These two federal healthcare programs are combined for presentation purposes on the face of the consolidated balance sheets and are reflected as an obligation in Fiscal 2023 and 2022.

Certain contracts require pay for performance or episode of care settlements whereby VUMC receives additional payment or pays a penalty based on its ability to achieve certain clinical measures or manage the cost of care for patients within various thresholds. VUMC estimates and accrues these adjustments in the period the related services are rendered and adjusts these estimates in future periods as settlements are finalized.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

Medicare

Amounts received under Medicare are subject to review and final determination by program intermediaries or their agents. Final settlements have been reached for program periods ended June 30, 2018. Final settlements have not been reached for subsequent years due to audit delays experienced with the Medicare Administrative Contractor, and thus, those periods remain subject to audit by program representatives.

TennCare

TennCare is a Medicaid managed care program implemented by the state of Tennessee to provide healthcare coverage to those patients eligible for Medicaid through the Federal 1115 Waiver Program. VUMC contracts with each of the three TennCare managed care organizations ("MCOs"), which offer health maintenance organization ("HMO") and Medicare Special Needs Products for Dual Eligible Enrollees. VUMC receives inpatient reimbursement through payments that are primarily based on the Medicare severity diagnostic related group system ("MS-DRG") for these plans. VUMC receives outpatient payments generally based on an ambulatory payment classification system ("APC"), and/or a payor-developed fee schedule.

In accordance with the Tennessee Hospital Assessment Act, VUMC receives a payment of a portion of its unreimbursed TennCare costs based upon VUMC's share of uninsured TennCare costs for all of the covered hospitals.

There is no assurance that this program will be continued in its current structure or will not be materially modified in the future, however, we anticipate funding will remain relatively stable over the coming year.

In Fiscal 2023 and 2022, patient service revenue includes the following supplemental amounts received in each respective period from TennCare.

<i>(\$ in thousands)</i>	<u>2023</u>	<u>2022</u>
Directed payments	\$ 60,571	\$ 36,633
Charity pool	21,570	26,026
Graduate medical education	19,088	14,688
Trauma fund	1,766	1,192
Workforce development and other	591	2,621
Virtual disproportionate share	8,539	7,651
Total supplemental TennCare revenue	<u>\$ 112,125</u>	<u>\$ 88,811</u>

5. Charity Care Assistance, Community Benefits, and Other Unrecovered Costs

VUMC maintains a policy which sets forth the criteria under which health care services are provided to patients who have minimal financial resources to pay for medical care. Additionally, VUMC provides other services that benefit the economically disadvantaged for which little or no payment is expected.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

Charity care is determined by examining patient and family income relative to the federal poverty guidelines. VUMC provides additional discounts based on the income level of the patient household using a sliding scale for those patients with a major catastrophic medical event not qualifying for full charity assistance. Tennessee law mandates that all uninsured patients receive a discount from billed charges for medically necessary services. These amounts are classified as charity care if the patient meets charity care criteria, for which no revenue is recorded, or are included as a part of price concessions.

VUMC maintains records to identify and monitor the level of charity care provided, and these records include gross charges and patient deductibles, coinsurance and copayments foregone for services furnished under its charity care policy, and the estimated cost of those services. VUMC calculates a ratio of total costs to gross charges and then multiplies the ratio by foregone charity care charges in determining the estimated cost of charity care. The gross amount of foregone charity care revenue in Fiscal 2023 and 2022 totals \$603.8 million and \$530.5 million, respectively. The estimated cost of providing care to charity patients in Fiscal 2023 and 2022 totals \$162.2 million and \$140.0 million, respectively.

In addition to the charity care services described above, TennCare/Medicaid and state indigent programs do not cover the full cost of providing care to beneficiaries of those programs. As a result, in addition to direct charity care costs, VUMC provided services related to TennCare/Medicaid and state indigent programs and was reimbursed substantially below the cost of rendering such services. VUMC also provides public health education and training for new health professionals and provides, without charge, services to the community at large for many patients with special needs.

6. Academic and Research Revenue

Academic and research revenue comprises the following for Fiscal 2023 and 2022:

<i>(\$ in thousands)</i>	2023	2022
Grants and contracts revenue		
Federally funded	\$ 398,876	\$ 383,592
Non-federally funded	133,139	108,904
	532,015	492,496
Facilities and administrative costs recovery	186,339	166,468
Total grants and contracts revenue	718,354	658,964
Other academic and research revenue	47,173	46,895
Academic and research revenue	<u>\$ 765,527</u>	<u>\$ 705,859</u>

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

7. Pledges Receivable, Net

Pledges receivable, net of applied discounts and allowance for uncollectible pledges, as of June 30, 2023 and 2022, were as follows:

<i>(\$ in thousands)</i>	2023	2022
Amounts due		
Within one year	\$ 17,459	\$ 19,476
In one to five years	30,405	34,312
Total pledges receivable	47,864	53,788
Unamortized discount	(1,034)	(1,336)
	46,830	52,452
Allowance for uncollectible pledges	(4,787)	(6,993)
Net pledges receivable	<u>\$ 42,043</u>	<u>\$ 45,459</u>
Net pledges receivable classified as		
Current	\$ 13,579	\$ 13,349
Noncurrent	28,464	32,110
	<u>\$ 42,043</u>	<u>\$ 45,459</u>

In addition to pledges reported as pledges receivable, VUMC had cumulative bequest intentions and conditional promises to give totaling \$93.3 million and \$76.6 million as of June 30, 2023 and 2022, respectively. Due to their conditional nature, VUMC does not recognize intentions to give as assets. Pledges receivables are presented in other current assets and other noncurrent assets on our consolidated balance sheets, as shown in Note 8.

8. Other Relevant Financial Information

Other current assets comprise the following as of June 30, 2023 and 2022:

<i>(\$ in thousands)</i>	2023	2022
Prepaid expenses	\$ 23,227	\$ 35,547
Other receivables	38,045	61,043
Amounts due from VU (see Note 3 Related Parties)	6,159	7,017
Current pledges receivable, net (see Note 7 Pledges Receivable, Net)	13,579	13,349
Expected recoveries from commercial insurance excess coverage	7,657	5,947
Total other current assets	<u>\$ 88,667</u>	<u>\$ 122,903</u>

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

Other noncurrent assets comprise the following as of June 30, 2023 and 2022:

<i>(\$ in thousands)</i>	2023	2022
Equity in unconsolidated organizations	\$ 65,055	\$ 62,080
Noncurrent pledges receivable, net (see Note 7 Pledges Receivable, Net)	28,464	32,110
Goodwill	27,028	27,028
Implementation costs incurred on hosting arrangements	40,789	18,108
Other	12,351	27,408
Total other noncurrent assets	<u>\$ 173,687</u>	<u>\$ 166,734</u>

Implementation costs incurred on hosting arrangements include accumulated amortization of \$0.9 million at June 30, 2023. Amortization expense amounted to \$0.9 million for Fiscal 2023. Amortization expense for each of the next five years is \$3.7 million.

Other operating revenues comprise the following for Fiscal 2023 and 2022

<i>(\$ in thousands)</i>	2023	2022
CARES funding	\$ —	\$ 72,682
Clinical contracts	50,825	55,645
Amounts recognized under MSA with VU (see Note 3 Related Parties)	30,315	30,958
VHS other revenue	26,923	22,726
Nonclinical contracts	21,876	20,588
Resident and house staff rotations	8,407	9,123
Royalty revenue	40,042	17,612
Other	46,106	49,402
Total other operating revenue	<u>\$ 224,494</u>	<u>\$ 278,736</u>

9. Investments

VUMC investments are made up of current investments, restricted cash, noncurrent investments, and noncurrent investments limited as to use on the face of the consolidated balance sheets. VUMC investments include assets limited as to use related to the following specified purposes as of June 30, 2023 and 2022:

<i>(\$ in thousands)</i>	2023	2022
Self-insured malpractice program	\$ 50,381	\$ 49,290
Donor endowments	94,885	85,430
Split-interest trusts	8,949	8,515
Supplemental employee retirement program assets	10,904	7,690
	<u>\$ 165,119</u>	<u>\$ 150,925</u>

VUMC's endowment does not include gift annuities, interests in trusts held by others, contributions pending donor designation, or contributions receivable.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

The Board of Directors' interpretation of its fiduciary responsibilities for donor-restricted endowments under the Uniform Prudent Management of Institutional Funds Act ("UPMIFA") requirements is to preserve intergenerational equity, barring the existence of any donor-specific provisions. Under this broad guideline, future endowment beneficiaries should receive at least the same level of real economic support as the current generation. The overarching objective is to preserve and enhance the real (inflation-adjusted) purchasing power of the endowment in perpetuity. VUMC invests assets to provide a relatively predictable and stable stream of earnings to meet spending needs and attain long-term return objectives without the assumption of undue risks.

Self-insured malpractice program – VUMC elects to self-insure a portion of its medical malpractice, professional, and general liability via an irrevocable self-insurance trust.

Donor endowments – Donor-restricted gifts where the principal amount is to be held in perpetuity. Distributions of earnings are restricted for use according to the donor's intent, as specified in a gift agreement. Donor endowments typically benefit specific programs in clinical departments of the Medical Center, for either, research, directorships, or general program support.

Split-interest trusts – Trusts established by donors where VUMC is named as beneficiary. Depending on the terms of the trust, VUMC may receive periodic distributions, and potentially a principal amount at some point in the future. Like donor endowments, split-interest trusts typically benefit specific programs as defined in the terms of the trust.

Supplemental executive retirement program assets – Assets set aside to fulfill obligations as they come due according to the terms of the retirement program.

Investments were as follows as of June 30, 2023 and 2022:

(\$ in thousands)	2023	2022
Corporate bonds	\$ 307,347	\$ 345,781
Equity mutual funds	143,681	123,707
Cash and cash equivalents	162,500	17,852
Split-interest trusts	8,949	8,515
Hedged equity mutual funds	38,692	137,325
Fixed income mutual funds	177,309	167,261
Certificates of deposit	13,246	18,301
Asset-backed securities	3,614	28,022
Mortgage-backed securities	99,468	6,542
Commercial paper	6,375	22,755
Government bonds	76,885	44,126
Hedged debt mutual funds	63,453	150,056
Commodities and managed futures mutual funds	22,654	42,063
Target date mutual funds	8,279	6,422
Equity securities	74,278	12,033
Total investments reported at fair value	1,206,730	1,130,761
Private equity investments recorded at net asset value	29,409	31,022
Multi-strategy hedge funds recorded at net asset value	20,870	17,055
Real estate mutual fund recorded at net asset value	22,228	-
Hedged equity fund recorded at net asset value	18,845	19,073
Total investments	\$ 1,298,082	\$ 1,197,911

Vanderbilt University Medical Center
Notes to Consolidated Financial Statements
June 30, 2023 and 2022

Investment returns comprise the following elements for Fiscal 2023 and 2022:

<i>(\$ in thousands)</i>	2023	2022
Interest and dividend income	\$ 52,494	\$ 23,891
Net realized (losses) gains on sales of securities	(6,550)	9,619
Realized investment gains	45,944	33,510
Unrealized investment gains (losses), net	22,535	(112,451)
Total investment returns	68,479	(78,941)
Investment manager, trustee and other fees	(815)	(598)
Restricted investment (income) loss	(6,621)	8,482
Total income (loss) from investments, net	<u>\$ 61,043</u>	<u>\$ (71,057)</u>

VUMC has exposure to risks, including liquidity, interest rate, counterparty, basis, regulatory, market, and credit risks, for marketable securities. Due to the level of risk exposure, it is possible that material near-term valuation changes for investment securities may occur.

VUMC manages all investments, including endowments, in various investment pools.

10. Property, Plant, and Equipment, Net

Property, plant, and equipment comprise the following as of June 30, 2023 and 2022:

<i>(\$ in thousands)</i>	2023	2022
Land and land improvements	\$ 52,999	\$ 44,230
Buildings and improvements	1,383,525	1,303,474
Equipment and software	926,739	813,736
Leasehold improvements	171,922	154,486
Construction in progress	145,502	98,300
Property, plant, and equipment at cost	2,680,687	2,414,226
Accumulated depreciation and amortization	(912,038)	(734,458)
Property, plant, and equipment, net	<u>\$ 1,768,649</u>	<u>\$ 1,679,768</u>

As part of the MTSA, VUMC acquired land and land improvements and buildings and improvements which are not allowed to be repurposed without the express consent of VU.

In Fiscal 2023 and 2022, VUMC capitalized interest of \$5.1 million and \$1.3 million, respectively, related to long-term capital projects, primarily the VUH bed tower, VUH lab expansion, and the VUH lobby and operating room renovations in Fiscal 2022.

Vanderbilt University Medical Center
Notes to Consolidated Financial Statements
June 30, 2023 and 2022

Property, plant, and equipment balances above include the following amounts related to capitalized internal use software:

<i>(\$ in thousands)</i>	<u>2023</u>	<u>2022</u>
Equipment and software	\$ 217,568	\$ 211,790
Construction in progress	7,057	3,931
	<u>224,625</u>	<u>215,721</u>
Accumulated amortization	(105,682)	(85,071)
Internal use software, carrying value	<u>\$ 118,943</u>	<u>\$ 130,650</u>

Depreciation and amortization comprise the following amounts in Fiscal 2023 and 2022:

<i>(\$ in thousands)</i>	<u>2023</u>	<u>2022</u>
Depreciation of tangible assets	\$ 146,362	\$ 131,677
Amortization of finance leases, leasehold improvements, and internal use software	44,684	41,322
Total depreciation and amortization	<u>\$ 191,046</u>	<u>\$ 172,999</u>

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

11. Long-Term Debt

Long-term debt comprises the following as of June 30, 2023 and 2022:

(\$ in thousands)	2023 Carrying Amount	2022 Carrying Amount	Effective Interest Rate ⁽²⁾	Fiscal Year of Maturity
Series debt				
Fixed-rate debt				
Series 2016A	\$ 476,930	\$ 476,930	4.1%	2047
Series 2016B	300,000	300,000	4.1%	2027
Series 2017A	121,270	121,270	4.1%	2049
Series 2017	100,000	100,000	4.2%	2038
Series 2021A	57,860	57,860	1.8%	2032
Series 2021B	237,565	237,565	3.2%	2053
Total fixed-rate debt	1,293,625	1,293,625	3.8%	
Variable-rate debt				
Series 2016F	19,800	21,900	4.4%	2042
Series 2018	53,385	53,385	3.7%	2050
Series 2021C	50,000	50,000	4.5%	2047
Series 2022A	70,500	—	3.8%	2056
Series 2022B	70,500	—	3.7%	2056
Total variable-rate debt	264,185	125,285	4.0%	
Total series debt	1,557,810	1,418,910		
Other long-term debt				
2019 Term Loan	35,000	35,000	4.5%	2050
2019 Notes	128,600	128,600	3.9%	2055
Subordinated note payable	64,583	69,583	3.2%	2036
Product financing arrangement	16,354	20,830	4.3%	2027
Finance leases	18,499	19,388	2.6%	Various
Other	7,725	—	0.0%	2026
Total other long-term debt	270,761	273,401	3.7%	
Subtotal ⁽¹⁾	1,828,571	1,692,311	3.8%	
Net unamortized premiums	62,841	66,838		
Net unamortized issuance costs	(12,562)	(12,693)		
Total long-term debt	1,878,850	1,746,456		
Current portion of long-term debt	(23,910)	(18,193)		
Long-term debt, net	\$ 1,854,940	\$ 1,728,263		

(1) The effective interest rate of 3.8% as of June 30, 2023, is presented exclusive of interest rate exchange agreements discussed in Note 12 Interest Rate Exchange Agreements. Inclusive of these agreements, the overall portfolio effective interest rate was 4.0%.

(2) The effective interest rate for each debt instrument is calculated by dividing each instrument's interest expense by the weighted average debt outstanding, and where applicable, interest expense is reduced by premium amortization and increased by original issue discount amortization. Interest rates per the agreements are detailed in the accompanying notes.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

On April 29, 2016, VUMC issued the Series 2016 A, B, C, D, E, and F bonds ("2016 Series Debt") and notes aggregating \$1.3 billion of proceeds for the purpose of financing the Medical Center Acquisition and paying a portion of the costs of issuance associated with the 2016 Series Debt.

The bonds and notes comprising the 2016 Series Debt were issued by the Health and Educational Facilities Board of The Metropolitan Government of Nashville and Davidson County, Tennessee ("HEFB"). As a conduit issuer, the HEFB loaned the debt proceeds to VUMC. VUMC's debt service requirements under these loan agreements coincide with required debt service of the actual HEFB bonds.

- The Series 2016A tax-exempt fixed-rate revenue bonds were issued in the par amount of \$476.9 million and include an original issue premium of \$59.6 million. The Series 2016A bonds have a final maturity date of July 1, 2046, and can be optionally redeemed at par on or after July 1, 2026. The 2016A bonds were structured as serial bonds with maturities from Fiscal 2030 through 2032, as well as three term bonds maturing Fiscal 2036 through 2047, which are subject to mandatory sinking fund redemption in lots. The Series 2016A bonds bear interest at 5% per annum and pay interest semiannually on July 1 and January 1.
- The Series 2016B taxable fixed-rate revenue bonds were issued in the par amount of \$300 million, bearing interest at 4.1% per annum. Interest is paid semiannually on July 1 and January 1, and has a bullet maturity of July 1, 2026. VUMC is entitled, at its option, to redeem all or a portion of the Series 2016B bonds before April 1, 2026, at a make-whole redemption price, which equals the greater of (i) 100% of the remaining outstanding principal and (ii) the net present value of the remaining scheduled principal and interest payments to the original maturity date, using a discount rate of 0.35% above rates for U.S. Treasury securities with comparable maturities.
- The Series 2016F taxable variable-rate revenue bonds were issued in the par amount of \$75 million and were placed privately with a bank. The bonds bore interest in a variable-rate mode at a fixed spread to one-month LIBOR of 2.5% through the initial mandatory tender date of July 1, 2022. During Fiscal 2018, \$53.1 million of the Series 2016F bonds were extinguished using proceeds from the 2018 tax-exempt fixed-rate revenue bonds, discussed further below. The renegotiated interest rate on the remaining \$21.9 million of principal outstanding was a variable-rate mode at a fixed spread to one-month LIBOR of 1.2%. During Fiscal 2022, the Series 2016F taxable variable-rate revenue bonds were modified and the renegotiated interest rate is a variable-rate mode at a fixed spread to SOFR of 0.8%. The remaining principal has a mandatory tender date of December 1, 2028. Beginning on July 1, 2022, VUMC began paying required annual principal payments ranging from \$2.1 million to \$2.7 million. The remaining \$5.3 million of principal is due on December 1, 2028.
- Prior to Fiscal 2022, Series 2016 C, D and E bonds were extinguished.

On July 26, 2017, the Series 2017A Tax-Exempt and Series 2017 Taxable Corporate Bonds were issued, and on August 1, 2017, the Series 2017B Taxable Revenue Bonds were issued ("2017 Series Debt"), aggregating \$271.3 million of proceeds for the purpose of refinancing existing debt, funding capital projects related to the MCJCHV expansion and the VUH bed expansion/clinical relocation, which was a phased project, and paying a portion of the costs of issuance associated with the 2017 Series Debt.

The Series 2017A Tax-Exempt Revenue Bonds and the Series 2017B Taxable Term Loan Revenue Note were issued by the HEFB. The Series 2017 Taxable Bonds were a corporate issue with VUMC as the issuer.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

- The Series 2017A tax-exempt fixed-rate revenue bonds were issued in the par amount of \$121.3 million and include an original issue premium of \$5.1 million. The final maturity date is July 1, 2048, and optional redemption at par can occur on or after July 1, 2027. The Series 2017A bonds bear interest at 4.4% per annum and pay interest semiannually on July 1 and January 1.
- The Series 2017 taxable fixed-rate corporate bonds were issued in the par amount of \$100.0 million, bearing interest at 4.2% per annum. Interest is paid semiannually on July 1 and January 1, and the bonds have a final maturity date of July 1, 2037. There is a bullet payable beginning July 1, 2026, that allows VUMC to call the debt.
- The Series 2017B taxable variable-rate term loan notes were issued in the par amount of \$50 million and placed privately with a bank. The notes bore interest initially at a fixed-spread to one-month LIBOR of 1.2%. The notes had a final maturity date of July 1, 2046, a tender date of August 1, 2024, and could be redeemed at any time. Proceeds from the issuance of the Series 2017B notes were used to extinguish the Series 2016C R-FLOATs, initially issued on April 29, 2016. During Fiscal 2022, the Series 2017B notes were extinguished using proceeds from the Series 2021C Taxable Revenue Bonds, discussed further below.

On April 20, 2018, the Series 2018 Tax-Exempt Revenue Bonds ("2018 Series Debt") aggregating \$53.4 million of proceeds were issued for the purpose of refinancing existing debt and paying a portion of the costs of issuance associated with the 2018 Series Debt. The Series 2018 Tax-Exempt Revenue Bonds were issued by the HEFB, were placed privately with a bank, and bore interest at a fixed spread to 81% of one-month LIBOR of 0.6%. The bonds have a final maturity date of July 1, 2049. Proceeds from the issuance of the Series 2018 bonds were used to extinguish a portion of the Series 2016F taxable variable-rate bonds. During Fiscal 2023, the Series 2018 bonds were modified and the renegotiated interest rate is a fixed spread of 79% of SOFR plus 0.76%.

On July 30, 2019, VUMC entered into a term loan agreement ("2019 Term Loan") with a lender for \$35 million to pay for the acquisition of Tennova – Lebanon (now VWCH) hospital facilities, near term capital expenditures, and costs of issuance. The term loan bore interest at a variable rate plus a fixed spread to one-month LIBOR of 0.50% through the maturity date of August 1, 2029. Due to LIBOR being sunset as the benchmark rate, the interest rate was modified during Fiscal 2023 to SOFR plus a fixed spread of 0.60%. VUMC has the option to prepay all or a portion of the loan at any time, subject to notice. The 2019 loan is subject to principal amortization commencing on July 1, 2024 and ending July 1, 2049, as defined in the 2019 loan agreement between VUMC and the lender.

On October 22, 2019, the 2019 Taxable Fixed Private Placement Notes ("2019 Notes") aggregating \$128.6 million of proceeds were issued for the purpose of refinancing existing debt and paying a portion of the costs of issuance associated with the 2019 Notes. The 2019 Notes were placed privately with a bank, and bear interest at a fixed rate of 3.9% per annum. The notes have a final maturity date of July 1, 2054.

On April 9, 2021, the 2021 Short-Term Loan was issued in the par amount of \$200 million for the purpose of refinancing the 2020 Loan. The debt bore interest at a fixed spread to LIBOR of 0.4% and had a maturity of April 8, 2022. During Fiscal 2022, the 2021 Short-Term Loan was extinguished using proceeds from the Series 2021A Tax-Exempt and Series 2021B Taxable Revenue Bonds discussed further below.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

On November 4, 2021, the Series 2021A Tax-Exempt and Series 2021B Taxable Revenue Bonds were issued, and on December 1, 2021, the Series 2021C Taxable Revenue Bonds were issued ("2021 Series Debt"), aggregating \$345.4 million of proceeds for the purpose of refinancing existing debt, funding capital projects, and paying a portion of the costs of issuance associated with the 2021 Series Debt. The 2021 Series was issued by the HEFB.

- The Series 2021A tax-exempt fixed-rate revenue bonds were issued in the par amount of \$57.9 million and include an original issue premium of \$16.2 million. The Series 2021A bonds have a bullet maturity of July 1, 2031, and can be optionally redeemed at par on or after January 1, 2031. The Series 2021A bonds bear interest at 5% per annum and pay interest semiannually on July 1 and January 1.
- The 2021B taxable fixed-rate revenue bonds were issued in the par amount of \$237.6 million, bearing interest at 3.2% per annum, which is paid semiannually on July 1 and January 1. The 2021B bonds have a final maturity of July 1, 2052 and are subject to mandatory sinking fund redemption in lots. VUMC is entitled, at its option, to redeem all or a portion of the Series 2021B bonds before January 1, 2052, at a redemption price, which equals the greater of (i) 100% of the remaining outstanding principal and (ii) the net present value of the remaining scheduled principal and interest payments to the original maturity date, using a discount rate of 0.20% above rates for U.S. Treasury securities with comparable maturities.
- The 2021C taxable variable-rate revenue bonds were issued in the par amount of \$50 million and were placed privately with a bank. The bonds bore interest in a variable-rate mode at a fixed spread to one-month LIBOR of 0.5%. Due to LIBOR being sunset as the benchmark rate, the interest rate was modified during Fiscal 2023 to SOFR plus a fixed spread of 0.63%. The bonds have a final maturity date of July 1, 2046, a tender date of December 1, 2027, and may be redeemed at any time. Proceeds from the issuance of the Series 2021C bonds were used to extinguish the Series 2017B notes.

On December 7, 2022, the Series 2022A Tax-Exempt and Series 2022B Tax-Exempt Revenue Bonds were issued for \$70.5 million each. The proceeds were used to fund capital projects, and to pay a portion of the costs of issuance. The bonds bear interest at SIFMA plus a fixed spread of 0.70% and 0.67%, respectively. The 2022 Series was issued by the HEFB.

Each of the bonds, notes, and loans represent separate obligations under a Master Trust Indenture ("MTI") structure. The MTI provides the flexibility for multiple parties to participate in debt issuances as part of an obligated group; presently, VUMC has no other third-party members participating in the obligated group. All debt issued under the MTI is a general obligation of the obligated group. Under the provisions of the Leasehold Deed of Trust, Security Agreement, Assignment of Rents and Leases, and Fixture Filing (the "Security Agreement") within the MTI, gross receivables of the obligated group are pledged as collateral. Additionally, the Security Agreement established a mortgage lien on (i) the leasehold interest of the land subject to the Ground Lease; (ii) the buildings, structures, improvements, and fixtures now or hereafter located on the land subject to the Ground Lease; and (iii) certain other collateral.

Trust indentures for certain bond issues contain covenants and restrictions, the most material of which include limitations on the issuance of additional debt, maintenance of a specified debt service coverage ratio, and a minimum amount of days cash on hand. VUMC complied with such covenants and restrictions as of June 30, 2023 and 2022.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

On April 29, 2016, VUMC delivered a secured subordinated promissory note in the amount of \$100 million to VU to finance the Acquisition (the “subordinated note”). In July of 2018, VU sold its rights to future principal and interest payments on this note to a third party. The note was issued at a fixed rate of 3.25% with monthly principal payments totaling \$5 million annually commencing on May 31, 2016, for a period of 20 years ending on April 30, 2036. VUMC may, at any time and from time to time, without premium or penalty, prepay all or any portion of the unpaid principal amount of the subordinated note. This note is secured by the gross receivables and mortgaged property described in the Security Agreement subject to the requirements of the 2016 Series Debt and the MTI.

As part of the Acquisition, VUMC assumed a 10-year, unsecured, noninterest-bearing product financing arrangement with a vendor for the purchase and implementation of internal use software. The annual payment of \$5.3 million is payable in monthly installments, is considered principal and imputed interest, and continues through Fiscal 2027. The balance due under the Product Financing Arrangement is \$16.4 million and \$20.8 million as of June 30, 2023 and 2022, respectively. At June 30, 2023 and 2022, \$4.7 million and \$4.5 million, respectively, was included in the current portion of long-term debt caption, with the remaining balance in long-term debt, net of current portion.

In Fiscal 2023 and 2022, noncash investing and financing activities totaled \$9.7 million and \$10.5 million, respectively, related to finance leases.

VUMC has an agreement with a bank to provide a general use line of credit with a maximum available commitment totaling \$100 million, which bore interest at a fixed spread to one-month LIBOR of 0.65% and has no maturity date if the line of credit is renewed annually. The line of credit accrued a commitment fee of 0.15% per annum on any unused portion of the line of credit. Effective April 4, 2023, the agreement was amended to modify the interest rate and commitment fee and extend the maturity date. The line of credit bears interest at a fixed spread to SOFR of 0.50%, accrues a commitment fee of 0.10% on any unused portion of the line of credit, and has a final maturity date of April 3, 2024.

VUMC established an additional \$50 million line of credit with a bank in Fiscal 2021. The line of credit bore interest at a fixed spread to one-month LIBOR of 0.45%, maturing in Fiscal 2022 with a commitment fee of 0.2% on any unused portion of the line of credit. Effective April 7, 2023, the agreement was amended to modify the interest rate and extend the maturity date. The line of credit bears interest at a fixed spread to SOFR of 0.60%, accrues a commitment fee of 0.18% on any unused portion of the line of credit, and has a maturity date of April 4, 2025.

During Fiscal 2023, VUMC established an additional \$50 million line of credit, which bears interest at a fixed spread to SOFR of 0.75%, accrues a commitment fee of 0.125% on any unused portion of the line of credit, and has a maturity date of May 8, 2026.

During Fiscal 2023, VUMC established an additional \$100 million line of credit, which bears interest at a fixed spread to SOFR of 0.62%, accrues a commitment fee of 0.15% on any unused portion of the line of credit, and has a maturity date of May 1, 2026.

There are no outstanding balances on lines of credit as of June 30, 2023 or 2022. Commitment fees for the lines of credit totaled \$0.2 million and \$0.3 million in Fiscal 2023 and Fiscal 2022, respectively.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

Interest paid on all obligations, including interest rate swap settlements, net of amounts capitalized, was \$69.9 million and \$62.6 million in Fiscal 2023 and 2022, respectively.

Principal retirements and scheduled sinking fund requirements based on maturity schedules for long-term debt due in subsequent fiscal years ending June 30 are as follows:

(\$ in thousands)

2024	\$	23,910
2025		19,893
2026		22,786
2027		317,402
2028		14,987
Thereafter		1,429,593
	\$	<u>1,828,571</u>

12. Interest Rate Exchange Agreements

Key features of VUMC interest rate exchange agreements are summarized below:

<u>Notional Amount</u>	<u>Pay Fixed Rate</u>	<u>Receive Variable Rate</u>	<u>Mandatory Termination Date</u>
\$75.0 million	4.24%	68% of one-month LIBOR	May 2, 2025
\$75.0 million	4.28%	68% of one-month LIBOR	April 29, 2026

VUMC incorporates these interest rate exchange agreements into its debt portfolio management strategy. There are no collateral pledging requirements. The agreements terminate automatically on May 2, 2025 and April 29, 2026, if not renegotiated or extended, at which point the exchange agreements will be settled at fair value.

VUMC recorded the following activity related to the interest rate exchange agreements during Fiscal 2023 and 2022:

(\$ in thousands)	<u>2023</u>	<u>2022</u>
Mark-to-market adjustments	\$ 11,862	\$ 31,845
Cash settlements	(2,251)	(6,004)
Unrealized gain on interest rate exchange agreements, net of cash settlements	<u>\$ 9,611</u>	<u>\$ 25,841</u>

13. Leases

VUMC has operating and finance leases for real estate, personal property and equipment. VUMC determines if an arrangement is a lease at the inception of a contract. Leases with an initial term of twelve months or less are not recorded in the consolidated balance sheets.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

VUMC has lease agreements which require payments for lease and non-lease components and has elected to account for these as a single lease component. For leases that commenced before the effective date of ASU 2016-02, VUMC elected the permitted practical expedients to not reassess the following: (i) whether any expired or existing contracts contain leases; (ii) the lease classification for any expired or existing leases; and (iii) initial direct costs for any existing leases.

Right-of-use assets represent VUMC's right to use an underlying asset during the lease term, and lease liabilities represent VUMC's obligation to make lease payments arising from the lease. Right-of-use assets and liabilities are recognized at the commencement date, based on the net present value of fixed lease payments over the lease term. VUMC's lease terms include options to extend or terminate the lease when it is reasonably certain that the options will be exercised. As most of VUMC's operating leases do not provide an implicit rate, VUMC uses its incremental borrowing rate based on the information available at the commencement date in determining the present value of lease payments. VUMC considers recent debt issuances, as well as publicly available data for instruments with similar characteristics when calculating its incremental borrowing rates. Finance lease agreements generally include an interest rate that is used to determine the present value of future lease payments. Operating fixed lease expense and finance lease depreciation expense are recognized on a straight-line basis over the lease term. Variable lease costs consist primarily of common area maintenance and other index adjustments.

Operating and finance lease right-of-use assets and lease liabilities as of June 30, 2023 and 2022, are as follows:

(\$ in thousands)	Balance Sheet Classification	2023	2022
Assets:			
Operating leases	Operating leases	\$ 845,573	\$ 826,560
Finance leases	Property, plant, and equipment, net	18,704	19,412
Total lease assets		<u>\$ 864,277</u>	<u>\$ 845,972</u>
Liabilities:			
Current:			
Operating leases	Current portion of operating lease liabilities	\$ 71,906	\$ 68,510
Finance leases	Current portion of long-term debt	9,483	6,618
Noncurrent:			
Operating leases	Noncurrent portion of operating lease liabilities	800,003	783,178
Finance leases	Long-term debt, net of current portion	9,016	12,770
Total lease liabilities		<u>\$ 890,408</u>	<u>\$ 871,076</u>
Weighted-average remaining term:			
Operating leases		54.8 years	56.3 years
Finance leases		2.8 years	3.4 years
Weighted-average discount rate:			
Operating leases		3.7%	3.7%
Finance leases		3.2%	2.7%

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

Included in the tables above is the Ground Lease with VU expiring in 2114 discussed below. Excluding this lease, the weighted average remaining lease term for VUMC's operating leases is 8.2 years as of June 30, 2023 and 7.5 years as of June 30, 2022. As of June 30, 2023 and 2022, the land lease comprises \$488.1 million and \$488.7 million, respectively, of the operating lease asset and \$490.8 million and \$491.4 million, respectively, of the operating lease liability detailed above.

Lease expense for finance and operating leases for the years ended June 30, 2023 and 2022, are as follows:

(\$ in thousands)	2023	2022
Finance lease expense:		
Amortization of leased assets	\$ 10,489	\$ 8,431
Interest on lease liabilities	497	467
Operating lease expense ⁽¹⁾	109,049	107,551
Short-term lease expense ⁽¹⁾	3,195	4,551
Variable lease expense ⁽¹⁾	16,944	15,665
	<u>\$ 140,174</u>	<u>\$ 136,665</u>

⁽¹⁾ Expense is included in "Facilities, equipment, and technology" in the consolidated statements of operations.

The following table presents supplemental cash flow information for the years ended June 30, 2023 and 2022:

(\$ in thousands)	2023	2022
Cash paid for amounts included in the measurement of lease liabilities:		
Operating cash flows for operating leases	\$ 106,246	\$ 105,366
Operating cash flows for finance leases	497	467
Financing cash flows for finance leases	10,626	7,333

The following table reconciles the undiscounted minimum lease payments to the operating and financing lease liabilities recorded in the consolidated balance sheet at June 30, 2023:

(\$ in thousands)	Operating Leases	Finance Leases
2024	\$ 101,251	\$ 9,800
2025	92,436	4,487
2026	77,956	1,844
2027	61,935	1,859
2028	53,100	659
Thereafter	1,824,915	816
Total minimum lease payments	2,211,593	19,465
Less: amount of lease payments representing interest	(1,339,684)	(966)
Present value of future minimum lease payments	871,909	18,499
Less: current lease obligations	(71,906)	(9,483)
Long-term lease obligations	<u>\$ 800,003</u>	<u>\$ 9,016</u>

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

Essential provisions of leases considered by management to be material are as follows:

- On April 29, 2016, VUMC entered into a Ground Lease with VU for approximately 1.7 million square feet of land for an initial term ending June 30, 2114, and an option to extend for up to two additional terms of 50 to 99 years each upon agreement by VU and VUMC. The annual base rent is payable monthly, and is CPI adjusted annually. VUMC made rental payments totaling \$22.1 million and \$20.4 million in Fiscal 2023 and 2022, respectively. The Ground Lease allows VUMC to use the land on which its campus and related buildings are located. Included in the table above are \$1.8 billion in ground lease payments representing future minimum rentals based on the initial annual base rent of \$19.4 million, excluding annual CPI adjustments.
- In July 2007, VU entered into an agreement to lease approximately 50% of the space in the 850,000 square foot One Hundred Oaks shopping center located approximately five miles from the main campus ("100 Oaks Lease"). VU redeveloped this leased space primarily for medical and office uses. In October 2014, VU agreed to an amendment which extends the original lease term to November 30, 2035, with an option to renew the lease further for four additional 10-year periods. As part of the lease agreement, the lessee also has first rights on leasing additional space in the shopping center and first rights on purchasing if the landlord desires to sell. On April 29, 2016, the 100 Oaks Lease was assigned to VUMC. On June 10, 2023, the lease was amended to add an additional 84,750 square feet of leased space within the facility. VUMC included minimum property rental payments totaling \$116.1 million related to this space in the above minimum lease payments table.
- On April 29, 2016, VU assigned to VUMC a lease for approximately 231,000 square feet of office space at 2525 West End Avenue with expiration dates ranging from 2026 through 2030, with options to renew for two additional five-year periods. VUMC included minimum lease payments totaling \$57.7 million related to this space in the above minimum lease payments table.
- On April 29, 2016, VUMC and VU entered into certain lease agreements for the use of space in buildings separately owned by each entity. As of June 30, 2023, VUMC's estimated future minimum lease payments to VU totaled \$31.2 million. Estimated future lease receipts from VU for the fiscal year ended June 30, 2024, are \$8.8 million, subject to annual renewal.
- On November 1, 2022, VUMC entered into a lease agreement for office space at 431 Great Circle Road, located approximately five miles from the main campus. The lease provided for initial occupancy of approximately 94,000 square feet, with occupancy of an additional 16,000 square feet of space commencing on February 16, 2023, for a total of 110,000 square feet. The lease expiration date is October 31, 2042. VUMC included minimum lease payments totaling \$48.3 million related to this space in the above minimum lease payments table.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

14. Net Assets

Net asset restrictions relate to the following purposes as of June 30, 2023 and 2022:

<i>(\$ in thousands)</i>	<u>2023</u>	<u>2022</u>
Donor-restricted – time or purpose		
Property, plant, and equipment	\$ 18,839	\$ 14,534
Research and education	166,396	150,086
Operations	12,818	5,335
Total donor-restricted – time or purpose	<u>\$ 198,053</u>	<u>\$ 169,955</u>
Donor restricted – perpetuity		
Research and education	<u>\$ 119,048</u>	<u>\$ 98,477</u>

Net assets without donor restrictions are free of donor-imposed restrictions. This classification includes all revenues, gains, and losses not restricted by donors. VUMC reports all expenditures in net assets without donor restrictions since the use of restricted contributions in accordance with donors' stipulations results in the release of the restriction.

Donor restricted – time or purpose contain donor-imposed stipulations that expire with the passage of time or that can be satisfied by the action of VUMC. These net assets may include restricted gifts including unconditional pledges, split-interest agreements, interests in trusts held by others, and accumulated appreciation on donor-restricted endowments not yet appropriated by the Board of Directors for distribution. Donor gifts that are restricted for funding capital projects are considered released from restriction once related capital expenditures have been made and the asset is placed in service.

Donor restricted – perpetuity contains amounts held in perpetuity as requested by donors. These net assets may include unconditional pledges, donor-restricted endowments, split-interest agreements, and interests in trusts held by others. Generally, the donors of these assets permit VUMC to use a portion of the income earned on related investments for specific purposes.

UPMIFA specifies that unless stated otherwise in a gift instrument, donor-restricted assets in an endowment fund are restricted assets until appropriated for expenditure. Barring the existence of specific instructions in gift agreements for donor-restricted endowments, VUMC reports the historical value of such endowments as donor restricted – perpetuity and the net accumulated appreciation as donor restricted – time or purpose. In this context, the historical value represents the original value of initial contributions restricted as permanent endowments plus the original value of subsequent contributions and, if applicable, the value of accumulations made in accordance with the direction of specific donor gift agreements.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

15. Fair Value Measurements

Fair value measurements represent the amount at which the instrument could be exchanged in an orderly transaction between market participants at the measurement date. VUMC utilizes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value into three levels:

- | | |
|---------|---|
| Level 1 | Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that VUMC has the ability to access. |
| Level 2 | Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets, quoted prices for identical or similar assets or liabilities in inactive markets, inputs other than quoted prices that are observable for the assets or liabilities, and inputs that are derived principally from or corroborated by observable market data by correlation or other means. |
| Level 3 | Inputs to the valuation methodology are unobservable and significant to the fair value measurement. Unobservable inputs reflect VUMC's assumptions about the inputs market participants would use in pricing the asset or liability, including assumptions about risk. Unobservable inputs are developed based on the best information available in the circumstances and may include VUMC's own data. |

VUMC's principal assets and liabilities are cash and cash equivalents, investments, patient accounts receivable, estimated receivables and liabilities under third-party programs, grants and contracts receivable, pledges receivable, operating lease assets, accounts payable and other accrued expenses, self-insurance reserves, operating lease liabilities, long-term debt, and interest rate exchange agreements. Except for long-term debt, the carrying amount of these assets and liabilities approximates fair value.

As of June 30, 2023, the carrying value and estimated fair value of total long-term debt totaled \$1.9 billion and \$1.7 billion, respectively. As of June 30, 2022, the carrying value and estimated fair value of total long-term debt totaled \$1.7 billion and \$1.7 billion, respectively. VUMC bases estimated fair value of long-term debt on market conditions prevailing at fiscal year-end reporting dates. Besides potentially volatile market conditions, fair value estimates typically reflect limited secondary market trading. The fair values of the fixed-rate Series Debt, as defined in Note 11 Long-Term Debt, were based on a Level 2 computation using quoted prices for similar liabilities in active markets as of June 30, 2023 and 2022, as applicable. The carrying amounts related to VUMC's variable-rate Series Debt and other long-term debt obligations approximate their fair values as of June 30, 2023 and 2022. As of June 30, 2023 and 2022, the fair values of the subordinated note payable and the product financing arrangement were based on a Level 2 discounted cash flow approach applying a risk-adjusted spread for issuers of similar credit quality to U.S. Treasury yields for securities with comparable maturities.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

For financial instruments measured at fair value on a recurring basis, the following tables summarize valuation hierarchy levels as of June 30, 2023 and 2022, determined by the nature of the financial instrument and the least observable input significant to the fair value measurement:

Fair Value Measurements as of June 30, 2023				
(\$ in thousands)	Level 1	Level 2	Level 3	Total Carrying Amount
Assets				
Corporate bonds	\$ —	\$ 307,347	\$ —	\$ 307,347
Equity mutual funds	22,887	120,794	—	143,681
Cash and cash equivalents	162,500	—	—	162,500
Beneficial interests in				
split-interest trusts	—	8,949	—	8,949
Hedged equity mutual funds	—	38,692	—	38,692
Fixed-income mutual funds	83,055	94,254	—	177,309
Certificates of deposit	—	13,246	—	13,246
Asset-backed securities	—	3,614	—	3,614
Mortgage-backed securities	—	99,468	—	99,468
Commercial paper	—	6,375	—	6,375
Government bonds	—	76,885	—	76,885
Hedged debt mutual funds	—	63,453	—	63,453
Commodities and managed				
futures mutual funds	8,628	14,026	—	22,654
Target date mutual funds	—	8,279	—	8,279
Equity securities	74,278	—	—	74,278
Total assets in the				
fair value hierarchy	<u>\$ 351,348</u>	<u>\$ 855,382</u>	<u>\$ —</u>	<u>\$ 1,206,730</u>
Investments measured at net				
asset value				91,352
Total assets reported				
at fair value				<u>\$ 1,298,082</u>
Liabilities				
Interest rate exchange				
agreements	<u>\$ —</u>	<u>\$ 33,157</u>	<u>\$ —</u>	<u>\$ 33,157</u>
Total liabilities reported				
at fair value	<u>\$ —</u>	<u>\$ 33,157</u>	<u>\$ —</u>	<u>\$ 33,157</u>

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

Fair Value Measurements as of June 30, 2022				
(\$ in thousands)	Level 1	Level 2	Level 3	Total Carrying Amount
Assets				
Corporate bonds	\$ —	\$ 345,781	\$ —	\$ 345,781
Equity mutual funds	19,887	103,820	—	123,707
Cash and cash equivalents	17,852	—	—	17,852
Beneficial interests in split-interest trusts	—	8,515	—	8,515
Hedged equity mutual funds	—	137,325	—	137,325
Fixed-income mutual funds	80,697	86,564	—	167,261
Certificates of deposit	—	18,301	—	18,301
Asset-backed securities	—	28,022	—	28,022
Mortgage-backed securities	—	6,542	—	6,542
Commercial paper	—	22,755	—	22,755
Government bonds	—	44,126	—	44,126
Hedged debt mutual funds	—	150,056	—	150,056
Commodities and managed futures mutual funds	8,135	33,928	—	42,063
Target date mutual funds	—	6,422	—	6,422
Equity securities	12,033	—	—	12,033
Total assets in the fair value hierarchy	\$ 138,604	\$ 992,157	\$ —	\$ 1,130,761
Investments measured at net asset value				67,150
Total assets reported at fair value				\$ 1,197,911
Liabilities				
Interest rate exchange agreements	\$ —	\$ 45,019	\$ —	\$ 45,019
Total liabilities reported at fair value	\$ —	\$ 45,019	\$ —	\$ 45,019

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

Certain of the investments are reported using a calculated NAV per share. These investments are not expected to be sold at amounts that are materially different from NAV. The following table identifies attributes relating to the nature and risk of investments for which fair value is determined using a calculated NAV as of June 30, 2023 and 2022:

June 30, 2023				
<i>(\$ in thousands)</i>	Carrying Amount	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Private equity	\$ 29,409	\$ 2,000	None	None
Multi-strategy hedge funds	20,870	5,000	Quarterly	65-95 Days
Real estate mutual fund	22,228	–	Semi-annual	90 Days
Hedged equity fund	18,845	–	Quarterly	90 Days
Total	<u>\$ 91,352</u>	<u>\$ 7,000</u>		

June 30, 2022				
<i>(\$ in thousands)</i>	Carrying Amount	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Private equity	\$ 31,022	\$ 3,500	None	None
Multi-strategy hedge funds	17,055	8,000	Quarterly	65-95 Days
Hedged equity fund	19,073	–	Quarterly	90 Days
Total	<u>\$ 67,150</u>	<u>\$ 11,500</u>		

VUMC employs derivatives, primarily interest rate exchange agreements, to help manage interest rate risks associated with variable-rate debt. In addition to the credit risk of the counterparty owing a balance, VUMC calculates the fair value of interest rate exchange agreements based on the present value of future net cash settlements that reflect market yields as of the measurement date.

Parties to interest rate exchange agreements are subject to risk for changes in interest rates, as well as the risk of credit loss in the event of nonperformance by the counterparty. VUMC deals only with high-quality counterparties that meet rating criteria for financial stability and credit-worthiness.

16. Retirement Plan

VUMC's full-time employees participate in a 403(b) defined contribution retirement plan administered by a third party. For eligible employees with one year of continuous service, this plan requires employer matching of employee contributions up to 5% of eligible compensation. The employee immediately vests in these contributions.

VUMC funds the obligations under this plan through monthly transfers to the respective retirement plan administrator with the corresponding expense recognized in the year incurred. During Fiscal 2023 and 2022, VUMC recognized \$96.2 million and \$86.4 million, respectively, of expense in connection with this plan.

Vanderbilt University Medical Center
Notes to Consolidated Financial Statements
June 30, 2023 and 2022

17. Functional Expense

VUMC provides general health care services primarily to residents within its geographic location and supports research and education programs. Total operating expense by nature and function for Fiscal 2023 and 2022 were as follows:

(\$ in thousands)

	For the Year Ended June 30, 2023			
	Healthcare Services	Academic Research and Education	Administrative and Other	Total
Salaries, wages, and benefits	\$ 2,716,045	\$ 691,294	\$ 290,481	\$ 3,697,820
Supplies and drugs	1,469,828	55,983	8,086	1,533,897
Facilities, equipment, and technology	206,222	69,358	123,377	398,957
Services and other	675,532	141,880	104,055	921,467
Depreciation and amortization	165,904	7,868	17,274	191,046
Interest	56,032	9,977	183	66,192
Total operating expense	<u>\$ 5,289,563</u>	<u>\$ 976,360</u>	<u>\$ 543,456</u>	<u>\$ 6,809,379</u>

(\$ in thousands)

	For the Year Ended June 30, 2022			
	Healthcare Services	Academic Research and Education	Administrative and Other	Total
Salaries, wages, and benefits	\$ 2,454,835	\$ 608,296	\$ 241,202	\$ 3,304,333
Supplies and drugs	1,310,567	64,759	2,990	1,378,316
Facilities, equipment, and technology	200,785	55,369	108,469	364,623
Services and other	670,226	136,492	103,065	909,783
Depreciation and amortization	150,181	1,140	21,678	172,999
Interest	50,391	9,527	12	59,930
Total operating expense	<u>\$ 4,836,985</u>	<u>\$ 875,583</u>	<u>\$ 477,416</u>	<u>\$ 6,189,984</u>

Certain expense categories are attributable to more than one function. Therefore, these expenses require an allocation on a reasonable basis that is consistently applied. The expenses that are allocated include salaries, wages, and benefits, and services and other.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

18. Commitments and Contingencies

Management has policies, procedures, and an organizational structure to enforce and monitor compliance with government statutes and regulations. VUMC's compliance with such laws and regulations is subject to future government review and interpretations, as well as regulatory actions unknown or unasserted at this time.

- **Litigation; Payor Disputes.** VUMC is a defendant in certain medical professional liability lawsuits and other civil actions, none of which are anticipated to have a material effect on VUMC's consolidated financial position. In addition, VUMC from time to time pursues claims and appeals of adverse payment decisions by third parties, including governmental and commercial payors. These include but are not limited to appeals relating to Medicare reimbursements matters before the Provider Reimbursement Review Board, payments for drugs purchased and dispensed through the 340B discounted drug purchasing program, and payments received under commercial payor reimbursement agreements. The outcomes of these claims and appeals are not expected to have a material effect on VUMC's consolidated financial position.
- **Compliance Program.** Through the operation of its compliance program, VUMC from time to time initiates the review of billing for clinical services provided by VUMC and its affiliated providers. VUMC has established a liability reserve relating to certain matters under review as of June 30, 2023 and 2022, which is not material to VUMC's consolidated financial position.
- **Regulatory Reviews.** VUMC is subject to the regulation and oversight of various state and federal government agencies and may from time to time receive subpoenas, requests for documents or other information, civil investigative demands or other legal process related to VUMC's business and operations (including its billing practices). VUMC's compliance with regulations and laws is subject to future government reviews and interpretations, as well as regulatory actions unknown at this time. VUMC believes that the liability, if any, from such reviews will not have a material effect on VUMC's consolidated financial position.
- **Medical Malpractice Self-Insurance.** The consolidated balance sheets include reserves for medical malpractice, professional, and general liability coverage totaling \$90.5 million as of June 30, 2023, and \$81.6 million as of June 30, 2022. These liabilities are measured at the net present value of those cash flows using a discount rate of 2.5% at both dates and are classified as current or noncurrent based on the expected timing of cash flows. Other current assets include expected recoveries from commercial insurance carriers under excess coverage arrangements totaling \$7.7 million as of June 30, 2023, and \$5.9 million as of June 30, 2022. During Fiscal 2023 and 2022, VUMC recorded expenses for medical malpractice self-insurance of \$24.4 million and \$30.4 million, respectively.
- **Employee Health and Workers' Compensation Insurance.** Accrued compensation and benefits included actuarially determined liabilities for employee health and workers' compensation claims totaling \$36.1 million and \$5.7 million, respectively, as of June 30, 2023, and \$23.0 million and \$5.7 million, respectively, as of June 30, 2022. During Fiscal 2023 and 2022, VUMC recorded expenses for self-insured employee health benefit plans, net of employee premiums, totaling \$310.7 million and \$261.4 million, respectively. During Fiscal 2023 and 2022, VUMC recorded expenses for self-insured workers' compensation plans of \$4.6 million and \$4.9 million, respectively.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

- **Federal and State Contracts and Other Requirements.** Expenditures related to federal and state grants and contracts are subject to adjustment based upon review by the granting agencies. Amounts of expenditures that granting agencies might disallow cannot be determined at this time. These amounts affect government grants and contracts revenue, as well as facilities and administrative costs recovery. VUMC does not expect these costs to impact the consolidated financial position by material amounts.
- **Health Care Services.** In Fiscal 2023 and 2022, 86% and 84%, respectively, of VUMC's operating revenue was generated by providing health care services, where revenue is affected by reimbursement arrangements with federal and state healthcare programs, commercial insurance, and other managed care payors. If reimbursement rates from third-party payors decrease or if contract terms become less favorable in future periods, VUMC's operating revenues may decline. See Note 4 Patient Service Revenue, Patient Accounts Receivable, and Estimated Third-Party Settlements, for further information regarding healthcare revenues and related receivables.
- **HIPAA Compliance.** Under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") and related regulations, the federal government has authority to investigate potential breaches of federal requirements for the privacy and security of patient health information to impose substantial fines and penalties in connection with violations. VUMC maintains policies, procedures, and organizational structures to enforce and monitor compliance with HIPAA, as well as other related federal and state laws, rules, and regulations.
- **Construction.** VUMC had contractual commitments under major construction and equipment contracts totaling \$243.9 million and \$53.5 million as of June 30, 2023 and 2022, respectively.

19. Other Events

COVID-19

In March of Fiscal 2020, COVID-19, a disease caused by the novel strain of the coronavirus, was designated by the World Health Organization as a global pandemic. A state of emergency was subsequently announced by the State of Tennessee, quickly followed by "stay at home" orders and orders for hospitals and outpatient surgical facilities to stop non-essential procedures. This global health crisis negatively impacted many facets of the business, including lower patient volumes and related revenues, significant increases in certain supply costs (in particular personal protective equipment) as well as difficulties sourcing these supplies, and volatility in the U.S. and global financial markets impacting VUMC's investment portfolios.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

Sources of pandemic relief include the federal stimulus package known as The Coronavirus Aid, Relief, and Economic Security ("CARES") Act, signed into law on March 27, 2020, the Coronavirus Response and Consolidated Appropriations Act ("CRCA") signed into law on December 27, 2020, and the American Rescue Plan ("ARP"), signed into law on March 11, 2021. These laws include a number of provisions: most importantly providing funding through the Public Health and Social Services Emergency Fund ("Provider Relief Fund") to reimburse eligible health care providers for health care-related expenses or lost revenues not otherwise reimbursed that are directly attributable to COVID-19. These provider relief funds included amounts distributed to providers based on their share of the Medicare fee-for-service reimbursement ("General Distributions"). The funds also included for certain targeted distributions ("Targeted Distributions") to qualifying providers (primarily rural and high impact areas). In Fiscal 2022, VUMC recognized as revenue approximately \$44.8 million in General Distributions and \$23.4 million in Targeted Distributions, for a total of \$68.2 million, under the Provider Relief Fund. There were no Provider Relief Funds received in Fiscal 2023. These amounts are presented in other operating revenue in the consolidated statements of operations.

In addition, the CARES Act provides for an expansion of the Medicare Accelerated and Advance Payment Program ("MAAPP") whereby inpatient acute care hospitals and other eligible providers may request an advance payment of up to 100% of their Medicare payment amount for a six-month period to be repaid through withholding of future Medicare fee-for-service payments beginning 120 days after receipt.

On October 1, 2020, the Continuing Appropriations and Other Extensions Acts amended the repayment terms for the funds received under the MAAPP. Under the revised repayment terms, the Centers for Medicare and Medicaid Services ("CMS") began to automatically recoup the advance payments one year from the original date of issuance by offsetting the payments against newly submitted Medicare claims. Once the recoupment period began, for the first eleven (11) months, Medicare automatically recouped payments at a rate of 25% of the Medicare claims amount otherwise owed to VUMC. After the first recoupment period of eleven (11) months, and continuing for the following six (6) months, Medicare automatically recoups payments at a rate of 50% of the Medicare claims amount otherwise owed to VUMC. After this repayment term concludes, any balance that remains outstanding will be subject to interest at a rate of four percent (4%) per annum. In accordance with the repayment terms, CMS recouped \$173.4 million of VUMC's MAAPP funds during Fiscal 2022 and recouped the remaining liability of \$16.0 million during Fiscal 2023. There is no MAAP liability as of June 30, 2023.

The CARES Act also allows for deferred payment of the employer portion of certain payroll taxes between March 27, 2020 and December 31, 2020, with 50% due December 31, 2021 and the remaining 50% due December 31, 2022. As of June 30, 2022, VUMC had deferred payroll tax payments of \$37.9 million included in accrued compensation and benefits in the consolidated balance sheet. This balance was paid during Fiscal 2023 and no balance remains at June 30, 2023.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2023 and 2022

In addition, the CARES Act suspended the sequestration payment adjustment percentage of 2% applied to all Medicare Fee-for-Service claims from May 1, 2020 through December 31, 2020, with subsequent acts extending through March 31, 2022. Upon conclusion of the suspension period, CMS applied a 1% payment adjustment for the period April 1, 2022 through June 30, 2022, at which time CMS reverted to the 2% payment adjustment for sequestration. This suspension positively impacted patient service revenue in the consolidated statements of operations by approximately \$14 million for Fiscal 2022. Beginning, September 1, 2020, the CARES Act also provided for a 20% Medicare supplement for Medicare patients diagnosed with COVID-19 that are admitted to the hospital, reflecting the additional costs of treating a patient with this diagnosis. During Fiscal 2022, VUMC recognized an additional \$6 million in patient service revenue in the consolidated statements of operations related to this supplement. There was no revenue recognized in Fiscal 2023 related to this supplement.

During Fiscal 2022, VUMC received \$73.2 million of supplemental payments directed from the State of Tennessee which covered a uniform increase for inpatient and outpatient services performed for the period January 1, 2022 through December 31, 2022. VUMC recognized \$36.6 million as patient service revenue related to the services performed for the period January 1, 2022 through June 30, 2022. The remaining \$36.6 million of payments received was recognized during Fiscal 2023. An additional tranche of supplemental payments directed from the State of Tennessee was received and recognized in Fiscal 2023 in the amount of \$23.9M.

During Fiscal 2022, VUMC recognized as other operating revenue \$4.5 million for Tennessee staffing grants. No staffing grants were received in Fiscal 2023.

Business Combination of Cool Springs Surgery Center

Effective July 1, 2021, VUMC amended the operating agreement related to the noncontrolling ownership interest held in the Cool Springs Surgery Center ("CSSC"). This amendment constituted a change in control event for CSSC and is now consolidated into the financial statements of VUMC. Prior to the change in control event date, VUMC accounted for its noncontrolling ownership interest in CSSC as an equity method investment. In accordance with FASB ASC 805, Business Combinations, the acquisition method was applied to account for this consolidation and CSSC was recorded at its fair value. The acquisition-date fair value of the previous equity interest was \$18.0 million. VUMC recognized a gain of \$14.7 million during Fiscal 2022 as a result of remeasuring its previous equity interest to fair value, which is presented in other nonoperating gains in the consolidated statements of operations.

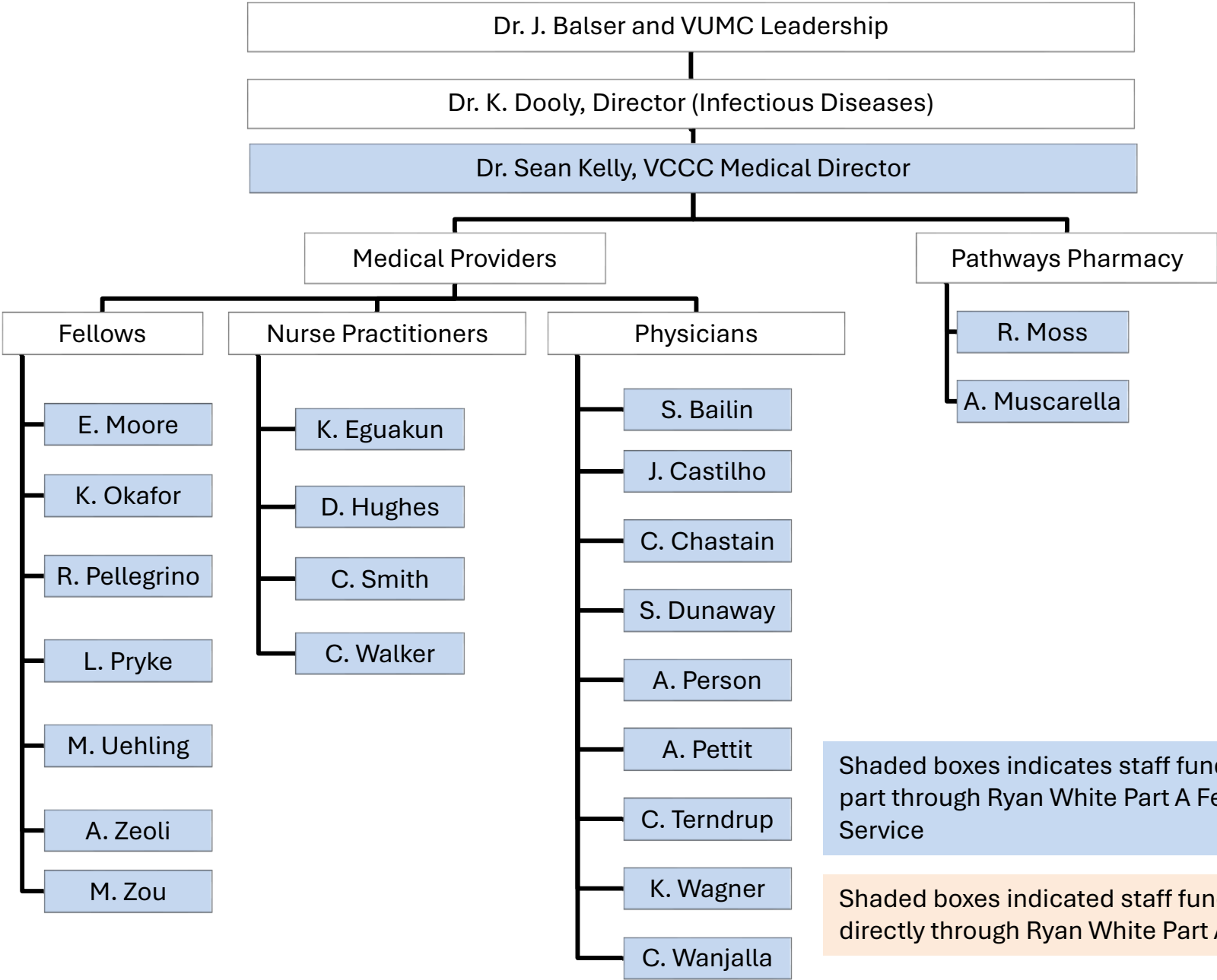
20. Subsequent Events

Management evaluated events after June 30, 2023 through September 29, 2023, the date on which the consolidated financial statements were issued. During this period, there were no subsequent events requiring recognition or disclosure in the consolidated financial statements that have not been recorded or disclosed.

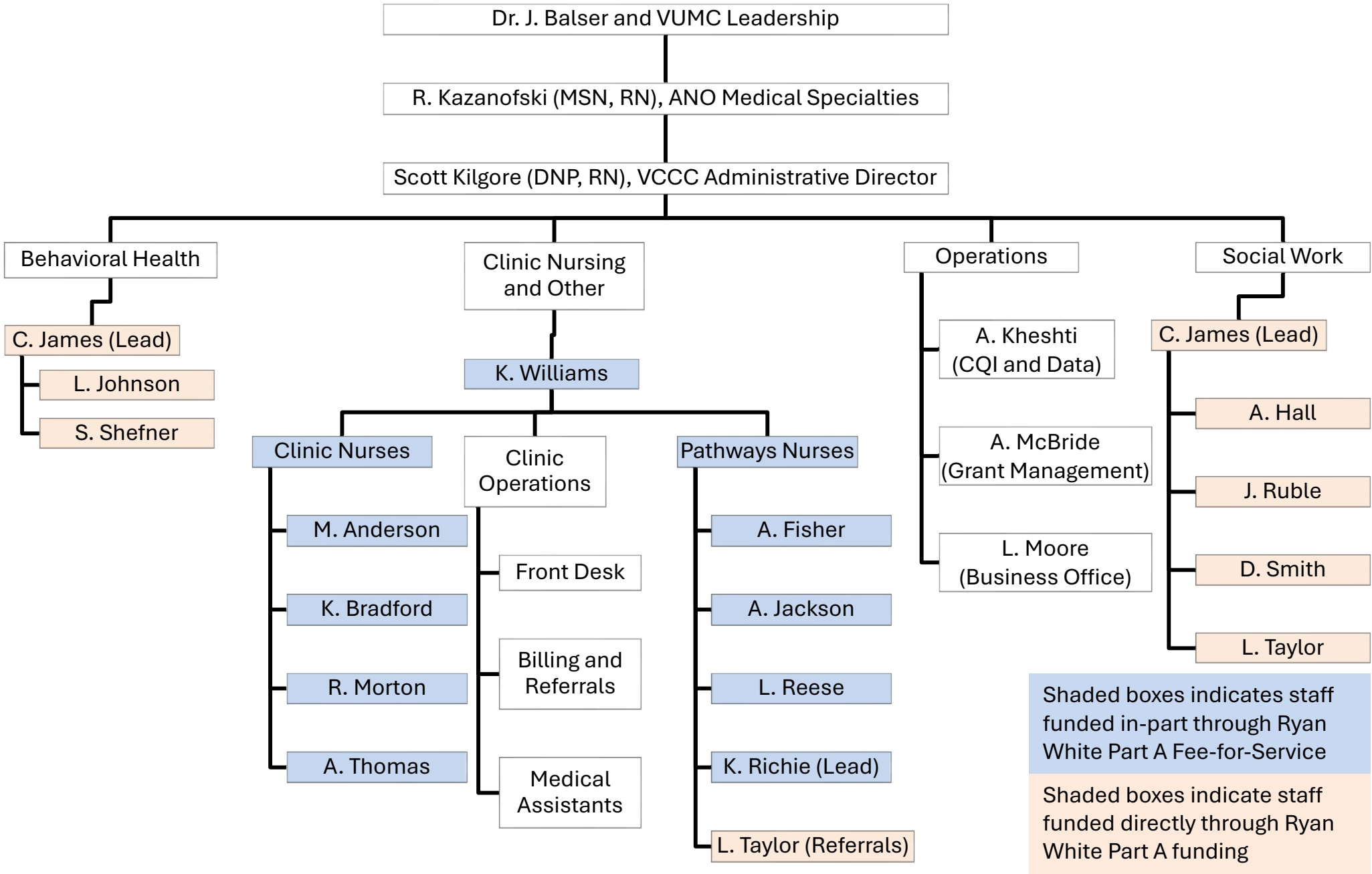
RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI
Attachment 10: Organizational Chart with Funded Components

Attachment 10: Organizational Chart with Funded Components

Ryan White Part A
Attachment 10: Organizational Chart (Medical)



Ryan White Part A
Attachment 10: Organizational Chart (Administrative)



RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI
Attachment 12: Implementation Plan

Attachment 12: Implementation Plan

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Project Approach and Process

III. Implementation Plan:

The importance of improving progress along the HIV care continuum is supported by the use of scientific research that leads to the identification of best practices and evidence-based practices. The use of best practices/evidenced informed models is preferred for all services and as applicable/available.

Describe in detail any evidence bases or best practice models you will use to provide the service. Include a reference to the model name and source of the best practice (e.g., "Healthy Living Project," CDC Evidence-Based Intervention-EBI).

<https://www.cdc.gov/hiv/research/interventionresearch/compendium/index.html>

Ideally, interventions will be based upon proven outreach and engagement models; and/or adaptations of proven models; and /or novel models of outreach and engagement in care, particularly developed for the HIV/AIDs population.

Implementation Plan and Evidence-Based Models of Service

All services provided at the VCCC are developed following nationally accepted standards as described in the U.S. Centers for Disease Control and Prevention's HIV Compendium of Best Practices¹⁰ and the U.S. Department of Health and Human Services Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents with HIV.¹¹ The laboratory evaluation used for intake and monitoring clients at the VCCC is based on the US Department of Health and Human Services Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents with HIV.

Clients are referred to the VCCC from various testing sites including CBOs, Health Department clinics, and private practices. For new clients, it is essential that VCCC's providers and staff work collaboratively to engage and retain clients in care. Once the client is seen by the provider, the client is followed closely for the first six months by the assigned PNCM and social worker. These staff members help the client address any issues that may be (or become) a barrier to care. The client's follow-up is also closely monitored by staff who will actively reach out to the client to reschedule missed appointments, help coordinate transportation or address other needs. A Linkage and Retention Nurse reaches out directly to clients who are lost-to-care (have not seen a VCCC provider for more than 12 months) to help get those clients return to treatments.

The client's success in treating HIV and attaining virologic control (a critical step in the HIV care continuum) is facilitated by an interdisciplinary care team approach. New clients are assessed to determine if Rapid ART is appropriate and all clients starting, stopping, or changing antiretrovirals are presented in a case conference setting (ART conference) which involves providers, behavioral health providers, social worker medical case managers, and members of the Pathways team. The treatment recommendations are based on the

¹⁰ <https://www.cdc.gov/hivpartners/php/compendium/index.html>

¹¹ <https://clinicalinfo.hiv.gov/en/guidelines/hiv-clinical-guidelines-adult-and-adolescent-arv/whats-new>

RFP: RW-2024-01 Ryan White HIV/AIDS Program (RWHAP) Part A and MAI Project Approach and Process

virologic, immunologic and co-morbidities status of the client and social factors and client preferences. This recommendation is then presented to the client by the Pathways team, who send the prescription to the client's preferred pharmacy, manage any prior authorizations or formulary compliance issues, and follow-up with the client during their first few weeks of taking the new medication to quickly identify and address any ADEs or pADEs. The Pathways team is also consulted, as needed, by clinic staff to address issues such as pharmacy access, drug interactions, and formulary changes. The Pathways team is also consulted as needed by clinic staff to deal with issues regarding pharmacy access, drug interactions, and formulary changes. This success of this evidence-based approach to care is reflected in the VCCC's HIV viral load suppression, which surpassed 90% for the first time during CY2023. Preliminary data indicate that the viral load suppression rate remained above 90% during CY2024 as well.



METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY

Department of Finance
700 President Ronald Reagan Way, STE 201
Nashville, Tennessee 37210

Metropolitan Government of Nashville and Davidson County Recipient of Metro Grant Funding Certifications of Assurance

As a condition of receipt of this funding, the Recipient assures that it will comply fully with the provisions of the following laws.

- The Americans with Disabilities Act (ADA) of 1990, 42 U.S.C. Section 12116;
- Title VI of the Civil Rights Act of 1964, as amended which prohibits discrimination on the basis of race, color, and national origin;
- Section 504 of the Rehabilitation Act of 1973, as amended, which prohibits discrimination against qualified individuals with disabilities;

CERTIFICATION REGARDING LOBBYING - Certification for Contracts, Grants, Loans, and Cooperative Agreements

By accepting this funding, the signee hereby certifies, to the best of his or her knowledge and belief, that:

- a. No federally appropriated funds have been paid or will be paid, by or on behalf of the Recipient, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, and entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.
- b. If any funds other than federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this grant, loan, or cooperative agreement, the Recipient shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- c. The Recipient shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including sub-grants, subcontracts, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients of federally appropriated funds shall certify and disclose accordingly.

Steve Munoz Digitally signed by Steve Munoz
Date: 2026.01.08 15:20:14 -06'00'

Signature of Authorized Representative

Name: D. Clinton Brown

Title: Associate VP, Office of Sponsored Programs

Agency Name: Vanderbilt University Medical Center

Date: 1/08/2026

METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY

Department of Finance
700 President Ronald Reagan Way, STE 201
Nashville, Tennessee 37210

**Metropolitan Government of Nashville and Davidson County
Recipient of Metro Grant Funding
Non-Profit Grants Manual Receipt Acknowledgement**

As a condition of receipt of this funding, the recipient acknowledges the following:

- Receipt of the Non-Profit Grants Manual, updated February 2, 2023, issued by the Division of Grants and Accountability. Electronic version can be located at the following: [Non-Profit Grant Resources](#)
- The recipient has read, understands and hereby affirms that the agency will adhere to the requirements and expectations outlined within the Non-Profit Grants Manual.
- The recipient understands that if the organization has any questions regarding the Non-Profit Grants Manual or its content, they will consult with the Metro department that awarded their grant.

**Note to Organizations: Please read the Non-Profits Grants Manual carefully to ensure that you understand the requirements and expectations before signing this document.*

Steve Munoz

Digitally signed by Steve Munoz
Date: 2026.01.08 15:21:21
+06'00'

Signature of Authorized Representative

Name: D. Clinton Brown

Title: Associate Vice President, OSP

Agency Name: Vanderbilt University Medical Center

Date: 1/08/2026

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **MAY 19 2015**

VANDERBILT UNIVERSITY MEDICAL
CENTER
C/O HOWARD S SILVER
HOGAN LOVELLS US LLP
555 13TH ST NW
WASHINGTON, DC 20004

Employer Identification Number:
35-2528741

DLN:
17053089319005

Contact Person:
MS. LEE ID# 31208

Contact Telephone Number:
(877) 829-5500

Accounting Period Ending:
June 30

Public Charity Status:
170(b)(1)(A)(iii)

Form 990 Required:
Yes

Effective Date of Exemption:
March 18, 2015

Contribution Deductibility:
Yes

Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

-2-

VANDERBILT UNIVERSITY MEDICAL

We have sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

A handwritten signature in cursive script, appearing to read "Tamera L. Spivey".

Director, Exempt Organizations

Details

VANDERBILT UNIVERSITY MEDICAL CENTER

I2II MEDICAL CENTER DRIVE NASHVILLE TN 37232

Christine Nguyen

(615) 936-0040

<http://www.vanderbiltheath.com/giving>

Status: Active

CO Number: CO4I52

Registration Date: 11/26/2008

Purpose

Is to operate academic medical and health science centers, including related health care, research, and other facilities, as part of an integrated, world-class health system affiliated with Vanderbilt University.

Financials (1)

Officers (5)

Charity Events (5)

Details	CO6803	HUMANITY-VANDERBILT UNIVERSITY		Active	NASHVILLE	TN	10/25/2004
Details	CO19698	HOUSESTAFF ALLIANCE FOUNDATION (THE)	THE VANDERBILT HOUSESTAFF ALLIANCE	Expired	NASHVILLE	TN	3/8/2013
Details	CO1111	OUR KIDS, INC.		Active	NASHVILLE	TN	4/1/1991
Details	CO22935	SAE - VANDERBILT UNIVERSITY (DEVELOPMENT AND ALUMNI RELATIONS)		Active			1/14/2015
Details	CO9720	STUDENTS FOR STUDENTS, INC.	VANDERBILT STUDENTS FOR STUDENTS	Expired	NASHVILLE	TN	10/17/2007
Details	CO39822	THE POWERS' VANDERBILT FUND		Expired	CLARKSVILLE	TN	1/13/2021

Details



VANDERBILT UNIVERSITY MEDICAL CENTER

1211 MEDICAL CENTER DRIVE NASHVILLE TN 37232

Christine Nguyen

(615) 936-0040

<http://www.vanderbiltheath.com/giving>

Status: Active

CO Number: CO4152

Registration Date: 11/26/2008

Purpose

Is to operate academic medical and health science centers, including related health care, research, and other facilities, as part of an integrated, world-class health system affiliated with Vanderbilt University.

Financials (1)	
Officers (5)	▼
Charity Events (5)	▼



Secretary of State Tre Hargett

Tre Hargett was elected by the Tennessee General Assembly to serve as Tennessee’s 37th secretary of state in 2009 and re-elected in 2013, 2017, 2021, and 2025. Secretary Hargett is the chief executive officer of the Department of State with oversight of more than 300 employees. He also serves on 16 boards and commissions, on two of which he is the presiding member. The services and oversight found in the Secretary of State’s office reach every department and agency in state government.

Details



VANDERBILT UNIVERSITY MEDICAL CENTER

1211 MEDICAL CENTER DRIVE NASHVILLE TN 37232

Christine Nguyen

(615) 936-0040

<http://www.vanderbiltheath.com/giving>

Status: Active

CO Number: CO4152

Registration Date: 11/26/2008

Purpose

Is to operate academic medical and health science centers, including related health care, research, and other facilities, as part of an integrated, world-class health system affiliated with Vanderbilt University.

Financials (1)	
Officers (5)	▼
Charity Events (5)	▼

Human Resources

Library & Archives

Publications

Records Management

LINKS

Tennessee General Assembly

Bureau of Ethics and Campaign Finance

Tennessee Code Unannotated

State Comptroller

State Treasurer

Title VI Information

Public Records Policy and Records Request Form



Tennessee
Secretary of State



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VANDERBILT UNIVERSITY MEDICAL CENTER

1211 MEDICAL CENTER DRIVE NASHVILLE TN 37232

Christine Nguyen

(615) 936-0040

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Financials (1)	
Officers (5)	▼
Charity Events (5)	▼

VANDERBILT UNIVERSITY MEDICAL CENTER

Entity Type: Nonprofit Corporation

Formed in: TENNESSEE

Term of Duration: Perpetual

Religious Type: Non-Religious

Benefit Type: Public Benefit Corporation

Status: Active

Control Number: 000792687

Initial Filing Date: 3/18/2015 3:00:00 PM

Fiscal Ending Month: June

AR Due Date: 10/01/2026

Registered Agent

NATIONAL REGISTERED AGENTS, INC.
300 MONTVUE RD
KNOXVILLE, TN 37919-5546

Principal Office Address

1161 21ST AVE SOUTH MEDICAL CENTER NORTH
D-3300
NASHVILLE, TN 37232-5545

Mailing Address

3122 WEST END AVE STE 1100
NASHVILLE, TN 37203-1000

AR Standing: Good	RA Standing: Good	Other Standing: Good	Revenue Standing: Good
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History (48) ^			
Type	Date	Tracking Number	Change History
2025 Annual Report for VANDERBILT UNIVERSITY MEDICAL CENTER	9/22/2025 1:12:32 PM	B2025785024	- Annual Report Due Date changed from: 10/1/2025 to: 10/1/2026 - Officers Changed - NAICS changed
Assumed Name Renewal for VANDERBILT UNIVERSITY MEDICAL CENTER	9/17/2025 4:14:32 PM	B2025781148	- Renewed Assumed Name: baby+co. - Assumed Name baby+co. Expiration Date Updated From: 9/28/2025 12:00:00 AM to 9/28/2030 12:00:00 AM
2024 Annual Report for Vanderbilt University Medical Center	9/18/2024 3:08:23 PM	B1626-5242	
Assumed Name Renewal for Vanderbilt University Medical Center	8/23/2024 9:31:33 AM	B1617-8843	- Assumed Name changed from: Vanderbilt Wilson County Hospital to: Vanderbilt Wilson County Hospital - Expiration Date changed from: 08/26/2024 to: 08/23/2029
Assumed Name for Vanderbilt University Medical Center	11/14/2023 10:28:14 AM	B1470-5881	New Assumed Name changed from: No Value to: Vanderbilt Transplant Pharmacy
Assumed Name Cancellation for Vanderbilt University Medical Center	9/25/2023 1:40:00 PM	B1442-4647	Name Status changed from: Active (Vanderbilt Clinic Pharmacy) to: Inactive - Name Cancelled (Vanderbilt Clinic Pharmacy)

2023 Annual Report for Vanderbilt University Medical Center	9/5/2023 9:57:14 AM	B1448-7072	
Assumed Name Renewal for Vanderbilt University Medical Center	10/18/2022 1:58:26 PM	B1291-8709	○ Assumed Name changed from: Vanderbilt Integrated Pharmacy to: Vanderbilt Integrated Pharmacy ○ Expiration Date changed from: 10/20/2022 to: 10/18/2027
Assumed Name Renewal for Vanderbilt University Medical Center	10/18/2022 1:53:53 PM	B1291-8691	○ Assumed Name changed from: Green Hills Medicine Pharmacy to: Green Hills Medicine Pharmacy ○ Expiration Date changed from: 10/20/2022 to: 10/18/2027
Assumed Name Renewal for Vanderbilt University Medical Center	10/18/2022 1:46:10 PM	B1291-8673	○ Assumed Name changed from: Vanderbilt Cool Springs Pharmacy to: Vanderbilt Cool Springs Pharmacy ○ Expiration Date changed from: 10/20/2022 to: 10/18/2027
Assumed Name Renewal for Vanderbilt University Medical Center	10/18/2022 1:37:59 PM	B1291-8640	○ Assumed Name changed from: Vanderbilt Children's Hospital Pharmacy to: Vanderbilt Children's Hospital Pharmacy ○ Expiration Date changed from: 10/20/2022 to: 10/18/2027
Assumed Name Renewal for Vanderbilt University Medical Center	10/18/2022 1:03:20 PM	B1291-8539	○ Assumed Name changed from: Vanderbilt Children's Outpatient Pharmacy to: Vanderbilt Children's Outpatient Pharmacy ○ Expiration Date changed from: 10/20/2022 to: 10/18/2027
Assumed Name Renewal for Vanderbilt University Medical Center	10/18/2022 12:53:23 PM	B1291-8508	○ Assumed Name changed from: Medical Center East Pharmacy to: Medical Center East Pharmacy ○ Expiration Date changed from: 10/20/2022 to: 10/18/2027
Assumed Name Renewal for Vanderbilt University Medical Center	10/18/2022 12:35:41 PM	B1291-8456	○ Assumed Name changed from: Vanderbilt Health Pharmacy to: Vanderbilt Health Pharmacy ○ Expiration Date changed from: 10/20/2022 to: 10/18/2027
Assumed Name Renewal for Vanderbilt University Medical Center	10/18/2022 12:23:31 PM	B1291-8423	○ Assumed Name changed from: Vanderbilt Psychiatric Hospital Pharmacy to: Vanderbilt Psychiatric Hospital Pharmacy ○ Expiration Date changed from: 10/20/2022 to: 10/18/2027
Assumed Name for Vanderbilt University Medical Center	9/29/2022 10:45:00 AM	B1283-4702	○ New Assumed Name changed from: No Value to: Vanderbilt Medical Laboratories
2022 Annual Report for Vanderbilt University Medical Center	9/12/2022 5:49:11 PM	B1277-0874	

2021 Annual Report for Vanderbilt University Medical Center	9/30/2021 5:03:24 PM	B1099-3675	Principal Address 1 changed from: 1161 21ST AVE S to: 1161 21ST A SOUTH MEDICAL CENTER NORTH D-3300
Assumed Name Renewal for Vanderbilt University Medical Center	5/6/2021 4:52:36 PM	B1029-5324	- Assumed Name changed from: Vanderbilt Outpatient Pharmacy to: Vanderbilt Outpatient Pharmacy - Expiration Date changed from: 05/25/2021 to: 05/06/2026
Assumed Name Renewal for Vanderbilt University Medical Center	5/6/2021 4:37:32 PM	B1029-5280	- Assumed Name changed from: Vanderbilt Clinic Pharmacy to: Vanderbilt Clinic Pharmacy - Expiration Date changed from: 05/25/2021 to: 05/06/2026
Assumed Name Renewal for Vanderbilt University Medical Center	5/6/2021 3:56:27 PM	B1029-5183	- Assumed Name changed from: Vanderbilt Nuclear Pharmacy to: Vanderbilt Nuclear Pharmacy - Expiration Date changed from: 05/25/2021 to: 05/06/2026
Assumed Name Renewal for Vanderbilt University Medical Center	5/6/2021 2:24:08 PM	B1029-4902	- Assumed Name changed from: Vanderbilt Oncology Pharmacy to: Vanderbilt Oncology Pharmacy - Expiration Date changed from: 05/25/2021 to: 05/06/2026
Assumed Name Renewal for Vanderbilt University Medical Center	5/6/2021 1:52:23 PM	B1029-4815	- Assumed Name changed from: Vanderbilt Adult Hospital Pharmacy to: Vanderbilt Adult Hospital Pharmacy - Expiration Date changed from: 05/25/2021 to: 05/06/2026
Administrative Amendment for Vanderbilt University Medical Center	2/23/2021 11:22:00 AM	B0987-1000	
Assumed Name for Vanderbilt University Medical Center	9/28/2020 3:48:12 PM	B0926-7514	New Assumed Name changed from: No Value to: baby+co.
2020 Annual Report for Vanderbilt University Medical Center	9/18/2020 3:19:43 PM	B0923-6054	
2019 Annual Report for Vanderbilt University Medical Center	9/17/2019 12:25:34 PM	B0757-7433	
Assumed Name for Vanderbilt University Medical Center	8/26/2019 11:50:00 AM	B0607-7385	New Assumed Name changed from: No Value to: Vanderbilt Wilson County Hospital
2018 Annual Report for Vanderbilt University Medical Center	10/2/2018 8:56:00 AM	B0596-8615	

System Amendment for Vanderbilt University Medical Center	10/2/2018 1:40:34 AM		
Registered Agent Change (by Agent)	1/26/2018 3:45:00 PM	*B0478-4997	
Assumed Name for Vanderbilt University Medical Center	10/20/2017 9:05:00 AM	B0438-5386	○ New Assumed Name changed from: No Value to: Vanderbilt Psychiatric Hospital Pharmacy
Assumed Name for Vanderbilt University Medical Center	10/20/2017 9:05:00 AM	B0438-5383	○ New Assumed Name changed from: No Value to: Vanderbilt Health Pharmacy
Assumed Name for Vanderbilt University Medical Center	10/20/2017 9:05:00 AM	B0438-5380	○ New Assumed Name changed from: No Value to: Medical Center East Pharmacy
Assumed Name for Vanderbilt University Medical Center	10/20/2017 9:05:00 AM	B0438-5377	○ New Assumed Name changed from: No Value to: Vanderbilt Children's Outpatient Pharmacy
Assumed Name for Vanderbilt University Medical Center	10/20/2017 9:05:00 AM	B0438-5374	○ New Assumed Name changed from: No Value to: Vanderbilt Children's Hospital Pharmacy
Assumed Name for Vanderbilt University Medical Center	10/20/2017 9:05:00 AM	B0438-5371	○ New Assumed Name changed from: No Value to: Vanderbilt Cool Springs Pharmacy
Assumed Name for Vanderbilt University Medical Center	10/20/2017 9:05:00 AM	B0438-5368	○ New Assumed Name changed from: No Value to: Green Hills Medicine Pharmacy
Assumed Name for Vanderbilt University Medical Center	10/20/2017 9:05:00 AM	B0438-5365	○ New Assumed Name changed from: No Value to: Vanderbilt Integrated Pharmacy
2017 Annual Report for Vanderbilt University Medical Center	9/15/2017 8:42:00 AM	B0433-5097	
2016 Annual Report for Vanderbilt University Medical Center	9/15/2016 8:30:00 AM	B0280-8438	
Assumed Name for Vanderbilt University Medical Center	5/25/2016 10:00:00 AM	B0244-2645	○ New Assumed Name changed from: No Value to: Vanderbilt Outpatient Pharmacy
Assumed Name for Vanderbilt University Medical Center	5/25/2016 10:00:00 AM	B0244-2646	○ New Assumed Name changed from: No Value to: Vanderbilt Clinic Pharmacy
Assumed Name for Vanderbilt University Medical Center	5/25/2016 10:00:00 AM	B0244-2649	○ New Assumed Name changed from: No Value to: Vanderbilt Oncology Pharmacy

Assumed Name for Vanderbilt University Medical Center	5/25/2016 10:00:00 AM	B0244-2648	○ New Assumed Name changed from: No Value to: Vanderbilt Nuclear Pharmacy ○ New Assumed Name changed from: No Value to: Vanderbilt Adult Hospital Pharmacy
Assumed Name for Vanderbilt University Medical Center	5/25/2016 10:00:00 AM	B0244-2647	
2015 Annual Report for Vanderbilt University Medical Center	9/29/2015 3:58:00 PM	B0133-7363	
Initial Filing for Vanderbilt University Medical Center	3/18/2015 3:00:00 PM	B0072-0037	

[Name History \(17\)](#)



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CHARTER
OF
VANDERBILT UNIVERSITY MEDICAL CENTER

Pursuant to the provisions of Section 48-52-102 of the Tennessee Nonprofit Corporation Act (Tennessee Code Annotated §§ 48-51-101 et seq.), as amended from time to time (the “**Tennessee Nonprofit Corporation Act**”), the undersigned corporation, acting through its incorporator, hereby adopts the following Charter:

ARTICLE I

The name of the corporation is Vanderbilt University Medical Center (the “**Corporation**”).

ARTICLE II

The Corporation (i) is a public benefit corporation; (ii) shall not be for profit; (iii) shall not have members; and (iv) is not a religious corporation. It is intended that the Corporation shall have the status of a nonprofit corporation that is exempt from federal income taxation under Section 501(a) of the Internal Revenue Code of 1986, as amended and to include any corresponding provisions of any subsequent federal tax laws (hereinafter, the “**Code**”), as an organization described and operated within the meaning of Section 501(c)(3) of the Code (or in each case, corresponding provisions of any subsequent federal tax laws).

ARTICLE III

(a) The street address and zip code of the Corporation’s initial registered office are 800 South Gay Street, Suite 2021, Knoxville, Tennessee, 37929-9710, and the county in which the initial registered office is located is Knox County. The name of the Corporation’s

03/10/2015 3:06 PM Received by Tennessee Secretary of State The Herbert

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initial registered agent at the Corporation's initial registered office is National Registered Agents, Inc.

(b) The street address and zip code of the Corporation's initial principal office are 1161 21st Avenue South, Suite D3300 MCN, Nashville, Tennessee, 37232-5545, and the county in which the initial principal office is located is Davidson County.

ARTICLE IV

The name, address and zip code of the incorporator of the Corporation are:

NAME

ADDRESS

Audrey J. Anderson

305 Kirkland Hall
Vanderbilt University
Nashville, TN 37240-0001

ARTICLE V

The Corporation's fiscal year shall conclude on June 30 every year.

ARTICLE VI

(a) The purposes for which the Corporation is organized are to operate exclusively for charitable, educational and scientific purposes, within the meaning of Section 501(c)(3) of the Code; and within such limits, and inclusive of such other consistent purposes, as may be set forth in the Bylaws of the Corporation, to: (1) operate, maintain or control one or more academic medical and health science centers, including (but not limited to) related health care, research, and other facilities (which also may be used for biomedical research, administration, and training and education of health care and life sciences professionals), all as may currently exist or as may be established in the future, as part of an integrated, world-class health system affiliated with Vanderbilt University, a Tennessee nonprofit corporation

08/07/2015 03:00 PM Received by Tennessee Secretary of State The Honorable

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(“**Vanderbilt University**”); (2) preserve, promote, and enhance the availability of health care services and scientific advances in public health, in the communities served by the Corporation, by Vanderbilt University, and their respective affiliates and networks; (3) otherwise advance purposes consistent with the general purposes herein and the mission as set forth in the Bylaws; and (4) otherwise fulfill and satisfy the Corporation’s obligations as a party to one or more agreements to be entered into by and among the Corporation, on the one hand, and Vanderbilt University on the other hand, to ensure that the Corporation and Vanderbilt may efficiently and effectively pursue shared interests in health-related research and training.

(b) Subject to the limitations contained in this Charter and the Bylaws and without partisanship of any kind, the Corporation shall be empowered to take all appropriate action in furtherance of the purposes set forth in paragraph (a) of this Article VI and to carry out any activities and exercise all powers available to corporations organized pursuant to the Tennessee Nonprofit Corporation Act that may be carried out by organizations that are described in Section 501(c)(3) of the Code.

(c) The Corporation shall not have or exercise any power or authority either expressly or by interpretation or by operation of law, nor shall it directly or indirectly engage in any activity, (i) that would prevent it from qualifying (and continuing to qualify) as an organization described in Section 501(c)(3) of the Code; (ii) that would prevent it from qualifying (and continuing to qualify) as an organization contributions to which are deductible under Sections 170(c)(2), 2055(a) and 2522(a), as applicable, of the Code; or (iii) that is not available to and may not be carried out by a corporation organized pursuant to the Tennessee Nonprofit Corporation Act.

B0072-0039 03/18/2015 3:00 PM Received by Tennessee Secretary of State The Harpeth

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(a) All powers of the Corporation shall be exercised by or under the authority of, and the affairs of the Corporation shall be managed by or under the direction of, its Board of Directors. The Board of Directors of the Corporation shall exercise all such powers subject to, and in accordance with, the Bylaws of the Corporation. The manner of appointment or election of the members of the Board of Directors shall be set forth in the Bylaws.

(b) Except as otherwise provided in this Charter, the internal affairs of the Corporation shall be governed by, and regulated and determined as provided in, the Corporation's Bylaws.

ARTICLE VIII

In all events and under all circumstances, and notwithstanding merger, consolidation, reorganization, termination, dissolution, or winding up of the Corporation, voluntary or involuntary, or by the operation of law, or upon amendment of this Charter:

(a) No part of the assets or net earnings of the Corporation shall inure to the benefit of or be distributable to its incorporator, directors, officers or other private persons having a personal or private interest in the Corporation, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services actually rendered and to make reimbursement in reasonable amounts for expenses actually incurred in carrying out the purposes set forth in Article VI hereof.

(b) No substantial part of the activities of the Corporation shall consist of the carrying on of propaganda, or of otherwise attempting to influence legislation, unless Section 501(h) of the Code shall apply to the Corporation, in which case the Corporation shall not normally make lobbying or grass roots expenditures in excess of the amounts therein specified.

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The Corporation shall not in any manner or to any extent participate in or intervene in (including the publishing or distributing of statements) any political campaign on behalf of (or in opposition to) any candidate for public office; nor shall it engage in any "prohibited transaction" as defined in Section 503(b) of the Code.

(c) Neither the whole, or any part or portion, of the assets or net earnings of the Corporation shall be used, nor shall the Corporation ever be operated, for objects or purposes other than those set forth in Article VI hereof.

(d) Upon dissolution of the Corporation, all of the Corporation's assets and property of every nature and description remaining after the payment of all liabilities and obligations of the Corporation (but not including assets held by the Corporation upon condition requiring return, transfer, or conveyance, which condition occurs by reason of the dissolution) shall be paid over and transferred to Vanderbilt University, or to one or more organizations as approved in writing by Vanderbilt University, provided that Vanderbilt University or such other approved organization(s) are then qualified for exemption from federal income taxes as organizations described in Section 501(c)(3) of the Code.

ARTICLE IX

The Corporation's Charter may be amended, restated or altered, in whole or in part, by the affirmative vote of at least seventy-five percent (75%) of all of the members of the Corporation's Board of Directors then in office at a duly called meeting at which a quorum is present; provided that (a) at least seven (7) calendar days' notice in writing setting forth a proposed amendment, restatement or alteration of the Corporation's Charter, or a reasonably detailed summary thereof, has first been provided to the Corporation's Board of Directors, and (b) the approval of Vanderbilt University shall be required for any amendment that adversely

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impacts the rights of Vanderbilt University or the VU Directors, as that term is defined in the Corporation's Bylaws.

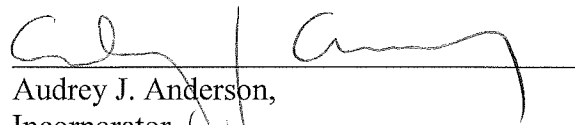
[Signature page follows]

B0072-0002 03/18/2015 3:00 PM Received by Tennessee Secretary of State The Harrell

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IN WITNESS WHEREOF, I have hereunto set my hand and seal this 18 day of

March, 2015.



Audrey J. Anderson,
Incorporator

[Signature Page to Charter]

BM072-0043 03/18/2015 3:00 PM Received by Tennessee Secretary of State Tre Hargett

VANDERBILT UNIVERSITY MEDICAL CENTER

Consolidated Financial Statements, Supplementary Information
And Uniform Guidance Reports And Schedule
Years Ended June 30, 2025 and 2024
With Report of Independent Auditors



The better the question.
The better the answer.
The better the world works.



Shape the future
with confidence

Vanderbilt University Medical Center

Consolidated Financial Statements and Uniform Guidance Reports and Schedule

June 30, 2025 and 2024

Contents

Report of Independent Auditors 1

Consolidated Financial Statements

Consolidated Balance Sheets 4

Consolidated Statements of Operations 5

Consolidated Statements of Changes in Net Assets 6

Consolidated Statements of Cash Flows 7

Notes to Consolidated Financial Statements 8

Supplementary Information

Schedule of Expenditures of Federal Awards and State Financial Assistance 43

Notes to the Schedule of Expenditures of Federal Awards and State Financial Assistance 68

Uniform Guidance Reports and Schedule

Report of Independent Auditors on Internal Control Over Financial Reporting and on
Compliance and Other Matters Based on an Audit of Financial Statements Performed
in Accordance With *Government Auditing Standards* 69

Report of Independent Auditors on Compliance for Each Major Federal Program and
Report on Internal Control Over Compliance Required by the Uniform Guidance 71

Schedule of Findings and Questioned Costs 75



Ernst & Young LLP
Suite 2100
222 2nd Avenue South
Nashville, TN 37201

Tel: +1 615 252 2000
ey.com

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Report of Independent Auditors

Senior Management and the Board of Directors
Vanderbilt University Medical Center

Report on the Audit of the Financial Statements

Opinion

We have audited the consolidated financial statements of Vanderbilt University Medical Center (VUMC), which comprise the consolidated balance sheets as of June 30, 2025 and 2024, and the related consolidated statements of operations, changes in net assets and cash flows for the years then ended, and the related notes (collectively referred to as the “financial statements”).

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of VUMC at June 30, 2025 and 2024, and the results of its operations, changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States (*Government Auditing Standards*). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of VUMC and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about VUMC's ability to continue as a going concern for one year after the date that the financial statements are issued.



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Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free of material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS and *Government Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of VUMC's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about VUMC's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. We have not performed any procedures with respect to the audited financial statements subsequent to September 30, 2025. The Schedule of Expenditures of Federal Awards and State Financial Assistance as required by Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* and the *State of Tennessee Audit Manual* is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.



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Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated September 30, 2025 on our consideration of VUMC's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of VUMC's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering VUMC's internal control over financial reporting and compliance.

Ernst & Young LLP

September 30, 2025, except for our report on the Schedule of Expenditures of Federal Awards and the State Financial Assistance, for which the date is March 4, 2026.

Vanderbilt University Medical Center

Consolidated Balance Sheets

June 30, 2025 and 2024

(\$ in thousands)

	2025	2024
Assets		
Current assets:		
Cash and cash equivalents	\$ 811,115	\$ 773,866
Current investments	158,263	127,856
Patient accounts receivable	863,995	789,534
TennCare directed payment receivable	178,983	–
Grants and contracts receivable	175,660	167,834
Inventories	205,492	184,069
Other current assets	119,296	104,691
Total current assets	2,512,804	2,147,850
Restricted cash	329,785	67,158
Noncurrent investments	1,281,218	1,073,228
Noncurrent investments limited as to use	261,050	209,718
Property, plant, and equipment, net	2,251,701	1,947,013
Operating lease assets	977,305	947,709
Other noncurrent assets	180,336	175,357
Total assets	<u>\$ 7,794,199</u>	<u>\$ 6,568,033</u>
Liabilities and Net Assets		
Current liabilities:		
Current portion of long-term debt	\$ 19,428	\$ 19,186
Accounts payable and other accrued expenses	631,273	534,121
Estimated liabilities under third-party programs	73,572	109,986
Accrued compensation and benefits	453,357	345,901
Current portion of operating lease liabilities	82,480	73,420
Current portion of deferred revenue	50,838	46,184
Current portion of self-insurance reserves	18,445	16,911
Total current liabilities	1,329,393	1,145,709
Long-term debt, net of current portion	2,488,850	1,983,670
Noncurrent portion of operating lease liabilities	931,210	901,155
Noncurrent portion of deferred revenue	682	–
Noncurrent portion of self-insurance reserves	77,213	66,310
Other noncurrent liabilities	7,370	9,453
Total liabilities	<u>4,834,718</u>	<u>4,106,297</u>
Net assets without donor restrictions:		
Net assets without donor restrictions controlled by VUMC	2,521,326	2,095,494
Net assets without donor restrictions related to noncontrolling interests	19,240	21,828
Total net assets without donor restrictions	2,540,566	2,117,322
Net assets with donor restrictions	418,915	344,414
Total net assets	<u>2,959,481</u>	<u>2,461,736</u>
Total liabilities and net assets	<u>\$ 7,794,199</u>	<u>\$ 6,568,033</u>

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

Vanderbilt University Medical Center
Consolidated Statements of Operations
Years Ended June 30, 2025 and 2024

<i>(\$ in thousands)</i>	2025	2024
Operating revenues		
Patient service revenue	\$ 7,444,087	\$ 6,556,562
Academic and research revenue	829,612	822,778
Other operating revenue	240,667	224,092
Total operating revenues	<u>8,514,366</u>	<u>7,603,432</u>
Operating expenses		
Salaries, wages, and benefits	4,390,792	3,959,568
Supplies and drugs	1,996,343	1,768,316
Facilities, equipment, and technology	464,957	432,411
Services and other	1,124,016	1,002,154
Depreciation and amortization	220,522	204,793
Interest	63,121	67,896
Total operating expenses	<u>8,259,751</u>	<u>7,435,138</u>
Income from operations	<u>254,615</u>	<u>168,294</u>
Nonoperating revenues and expenses		
Income from investments	136,834	111,010
Gift income	26,722	25,428
Earnings of unconsolidated organizations	11,515	8,529
Gain on interest rate exchange agreements	—	14,907
Total nonoperating revenues and expenses	<u>175,071</u>	<u>159,874</u>
Excess of revenues over expenses	429,686	328,168
Excess of revenues over expenses attributable to noncontrolling interests	<u>(6,110)</u>	<u>(7,333)</u>
Excess of revenues over expenses attributable to VUMC	423,576	320,835
Other changes in net assets without donor restrictions		
Change in noncontrolling interests' net assets	(2,588)	(101)
Net assets released from restriction for capital	1,412	—
Other changes	844	134
Total changes in net assets without donor restrictions	<u>\$ 423,244</u>	<u>\$ 320,868</u>

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

Vanderbilt University Medical Center
Consolidated Statements of Changes in Net Assets
Years Ended June 30, 2025 and 2024

<i>(\$ in thousands)</i>	2025	2024
Net assets without donor restrictions		
Net assets without donor restrictions at the beginning of the period	\$ 2,117,322	\$ 1,796,454
Excess of revenues over expenses attributable to VUMC	423,576	320,835
Change in noncontrolling interests' net assets	(2,588)	(101)
Net assets released from restriction for capital	1,412	—
Other changes	844	134
Change in net assets without donor restrictions	423,244	320,868
Net assets without donor restrictions at the end of the period	<u>\$ 2,540,566</u>	<u>\$ 2,117,322</u>
Net assets with donor restrictions		
Net assets with donor restrictions at the beginning of the period	\$ 344,414	\$ 317,101
Contributions	84,971	34,226
Restricted investment income	15,530	13,051
Net assets released from restrictions for operations	(23,758)	(21,416)
Net assets released from restriction for capital	(1,412)	—
Other changes	(830)	1,452
Change in net assets with donor restrictions	74,501	27,313
Net assets with donor restrictions at the end of the period	<u>\$ 418,915</u>	<u>\$ 344,414</u>
Total net assets		
Beginning of the period	\$ 2,461,736	\$ 2,113,555
Change in total net assets	497,745	348,181
End of the period	<u>\$ 2,959,481</u>	<u>\$ 2,461,736</u>

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

Vanderbilt University Medical Center
Consolidated Statements of Cash Flows
Years Ended June 30, 2025 and 2024

<i>(\$ in thousands)</i>	2025	2024
Cash flows from operating activities		
Change in total net assets	\$ 497,745	\$ 348,181
Adjustments to reconcile change in total net assets to net cash provided by operating activities:		
Depreciation and amortization	220,522	204,793
Investment gains	(74,589)	(60,003)
Purchases of trading securities	(303,279)	(168,941)
Sales of trading securities	159,814	106,404
Gain on interest rate exchange agreements	—	(15,561)
Implementation costs incurred on hosting arrangements	(1,760)	(5,714)
Amortization of implementation costs incurred on hosting arrangements	4,491	4,371
Restricted contributions for endowments and property, plant, and equipment	(54,565)	(20,177)
Noncash lease expense	78,147	74,176
Other noncash activities	(8,295)	(10,767)
(Decrease) increase in cash due to changes in:		
Patient accounts receivable	(74,461)	(59,482)
TennCare directed payment receivable	(178,983)	—
Grants and contracts receivable	(7,826)	(19,291)
Accounts payable and other accrued expenses	110,590	54,415
Estimated liabilities under third-party programs	(36,414)	42,964
Accrued compensation and benefits	107,456	210
Operating lease liabilities	(70,676)	(73,979)
Other assets and other liabilities, net	(10,685)	(13,160)
Net cash provided by operating activities	<u>357,232</u>	<u>388,439</u>
Cash flows from investing activities		
Purchases of property, plant, and equipment	(536,606)	(375,953)
Purchases of long-term securities	(380,184)	(454,804)
Sales and maturities of long-term securities	309,347	370,069
Net cash used in investing activities	<u>(607,443)</u>	<u>(460,688)</u>
Cash flows from financing activities		
Proceeds from issuance of long-term debt	653,294	151,257
Draw on line-of-credit	100,000	15,000
Debt issuance costs	(3,541)	(1,227)
Repayment of long-term debt and line-of-credit	(239,533)	(29,428)
Principal payments under finance lease obligations	(6,000)	(9,726)
Restricted contributions for endowments and property, plant, and equipment	54,565	20,177
Distributions to noncontrolling interests	(8,698)	(7,434)
Net cash provided by financing activities	<u>550,087</u>	<u>138,619</u>
Net change in cash, cash equivalents, and restricted cash	299,876	66,370
Cash, cash equivalents, and restricted cash		
Beginning of the period	841,024	774,654
End of the period	<u>\$ 1,140,900</u>	<u>\$ 841,024</u>

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

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

1. Description of Organization

Vanderbilt University Medical Center (“VUMC”) is a Tennessee not-for-profit corporation incorporated in March of 2015 to operate an academic medical center including a comprehensive research, teaching, and patient care health system (the “Medical Center”). Until April 29, 2016, the Medical Center operated as a unit within Vanderbilt University (the “University” or “VU”), as a part of the University’s administrative structure, with the same governing board, legal, financial, and other shared services. VUMC began operations effective April 30, 2016, following the closing of the sale of the Medical Center by the University (the “Acquisition”).

VUMC owns and operates three hospitals located on the main campus (“Medical Center Main Campus” or “MCMC”) of the University in Nashville, Tennessee: Vanderbilt University Hospital (“VUH”), Monroe Carell Junior Children’s Hospital at Vanderbilt (“Monroe Carell”), and Vanderbilt Psychiatric Hospital (“VPH”). In addition, VUMC partially owns Vanderbilt Stallworth Rehabilitation Hospital (“VSRH”), also located on the main campus of the University, through a joint venture with Encompass Health Corp. in which VUMC holds a 50% interest, including a 1% interest held by Vanderbilt Health Services, LLC, (“VHS”), a VUMC wholly owned subsidiary. Effective August 1, 2019, VUMC acquired from Community Health Systems, Inc. (“CHS”): Tennova Healthcare – Lebanon, now known as Vanderbilt Wilson County Hospital (“VWCH”). Effective January 1, 2021, VUMC acquired from CHS: Tennova Healthcare – Shelbyville and Tennova Healthcare – Harton, now known as Vanderbilt Bedford Hospital (“VBCH”) and Vanderbilt Tullahoma-Harton Hospital (“VTHH”), respectively. At the same time as the acquisition of VBCH and VTHH, VUMC acquired a noncontrolling ownership interest in CHS’s affiliated Tennova Healthcare – Clarksville (“VMH”). VUH, Monroe Carell, VPH, VWCH, VBCH, and VTHH are licensed for 1,723 beds, and VSRH is licensed for 80 beds.

VUMC consists of two major operating divisions and an administrative overhead division. The operating divisions include the Clinical Enterprise and Academic Enterprise divisions. The administrative overhead division is referred to as Medical Center Administration (“MCA”).

The Clinical Enterprise division includes the professional clinical practice revenues and related expenses of the Vanderbilt Medical Group (“VMG”), and technical revenues and associated expenses for the operation of VUMC’s hospitals and clinic facilities, including VUH, Monroe Carell, VPH, VWCH, VBCH, and VTHH. The Clinical Enterprise also includes VHS, Health Professional Solutions, LLC (“HPS”), and Nashville Biosciences, LLC (“NashBio”).

- VUH is a quaternary care teaching hospital licensed for 814 acute care and specialty beds. VUH, a Level I trauma center, provides advanced patient care and serves as a key site for medical education and clinical research conducted by physician faculty. VUH includes a comprehensive burn center, the Vanderbilt Transplant Center, the Vanderbilt Heart and Vascular Institute, and the Vanderbilt Ingram Cancer Center.
- Monroe Carell is a pediatric quaternary care teaching hospital licensed for 363 beds (182 acute and specialty, 65 pediatric intensive care, and 116 neonatal intensive care). Monroe Carell is the region’s only full-service pediatric hospital, with over 30 pediatric specialties. Monroe Carell serves as a site for medical education and clinical research conducted by pediatric physician faculty, houses the only Level IV neonatal intensive care center and the only Level I pediatric trauma center within the region, and is a regional referral center for extracorporeal membrane oxygenation (heart and lung failure).

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

- VPH is a psychiatric hospital licensed for 106 beds and provides inpatient care to pediatric, adolescent, adult, and geriatric patients. Also, VPH provides partial hospitalization programs to both adult and adolescent patients, psychiatric assessment services, adult intensive outpatient programs, and neuromodulation procedures through electroconvulsive therapy and transcranial magnetic stimulation.
- VWCH is a 245 licensed bed hospital and is a substantial provider of both inpatient and outpatient medical services in Lebanon, Tennessee. VWCH, a Level III trauma center, offers an accredited chest pain center, stroke center, cancer center, comprehensive weight loss center, comprehensive total joint program for orthopedics, and interventional cardiology.
- VBCH is a 60 licensed bed, Joint Commission-accredited hospital, which offers a range of inpatient and outpatient medical and surgical services, along with emergency room services.
- VTHH is a 135 licensed bed Joint Commission-accredited hospital, which offers a full range of inpatient and outpatient surgical and specialty services including interventional cardiology, orthopedics, urology, a sleep center, cardiac rehabilitation, obstetrics, and physical rehabilitation. The hospital also features an accredited chest pain center.
- VMG is the practice group of physicians and advanced practice practitioners employed by VUMC, many of whom, when appropriate and required, have faculty appointments from the University, who perform billable professional medical services. VMG is not a separate legal entity. VMG has a board which consists of the VUMC clinical service chiefs, who also serve as clinical department chairs. Under the oversight of VUMC executive leadership, VMG sets professional practice standards, bylaws, policies, and procedures. VUMC bills for services rendered by VMG clinicians in both inpatient and outpatient locations. Collected fees derive a component of each VMG clinician's compensation. VMG includes nationally recognized physicians whose expertise spans the spectrum from primary care to the most specialized quaternary discipline. VMG members are "board certified" or eligible for board certification, as required by bylaws. All VMG members are re-credentialed every three years in accordance with the Centers for Medicare and Medicaid Services, The Joint Commission, and the National Committee for Quality Assurance Standards. Most of the specialties and subspecialties currently recognized by the various national specialty boards are represented in VMG.
- VHS serves as a holding company for 17 first tier health care related subsidiaries and joint ventures owned with various entities, including, but not limited to, VSRH, Vanderbilt Integrated Providers ("VIP") and the Vanderbilt Health Affiliated Network ("VHAN"). VHS operations primarily consist of community physician practices, walk-in and retail health clinics, imaging services, outpatient surgery centers, radiation oncology centers, a home health care agency, a home infusion and respiratory service, an affiliated health network, accountable care organizations, and a rehabilitation hospital. VIP employs providers and staff located off the main VUMC campus and affiliates with or purchases and operates physician practices in the region. VHAN contracts with other healthcare providers, including hospitals, physicians, and physician groups to jointly develop and implement a clinical integration program through a clinically integrated network of physicians and hospitals. These subsidiaries of VHS include clinics managed in multiple outpatient locations throughout middle Tennessee and southwestern Kentucky.
- HPS is a holding company that holds interest in four VUMC subsidiaries that engage in or support various health business to business activities to improve the quality and availability of health care services in the community. These subsidiaries include businesses focused on pharmacy, supply chain, and clinically integrated support services.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

- NashBio deploys the biospecimens and genomic data and de-identified medical records of VUMC known as “BioVU”, along with other information, to provide commercial services and products to life science industry customers in connection with pharmaceutical, biotechnology, and medical research and development activities.

The Academic Enterprise division includes all research, research-support activities, and faculty endeavors supporting post-graduate training programs. A significant funding source for VUMC’s research has historically been the federal government. Federal funding is received from the Department of Health and Human Services, the Department of Defense, the National Science Foundation, and other federal agencies. Sponsored research awards, including multi-year grants and contracts from government sources, foundations, associations, and corporations signify future research commitments. Also, core activities supporting research, including advanced computing and grant administration, are included in this division.

VUMC has entered into debt agreements further discussed below. Certain of these debt agreements contain required disclosures outlining annual and quarterly reporting requirements. In addition, certain of these debt agreements require notices of the occurrence of significant events which include but are not limited to delinquencies, bond calls, rating changes, bankruptcies, and mergers or acquisitions. The Obligated Group includes the wholly-owned hospitals located on the MCMC along with all associated on-campus and off-campus ambulatory clinics, the Academic Enterprise, MCA, VWCH, and VMG.

The terms “Company,” “VUMC,” “we,” “our,” or “us” as used herein and unless otherwise stated or indicated by context refer to Vanderbilt University Medical Center and its affiliates. The terms “facilities” or “hospitals” refer to entities owned and operated by VUMC and its affiliates, and the term “employees” refers to employees of VUMC and its affiliates.

VUMC operates on a fiscal year which ends on June 30. The term “Fiscal” preceding a year refers to a particular VUMC fiscal year.

2. Summary of Significant Accounting Policies

Basis of Presentation

The accompanying consolidated financial statements have been prepared on the accrual basis in accordance with accounting principles generally accepted in the United States of America (“U.S. GAAP”). Based on the existence or absence of donor-imposed restrictions, VUMC classifies resources into two categories: net assets without donor restrictions and net assets with donor restrictions.

Principles of Consolidation

The consolidated financial statements include the accounts of VUMC and its wholly owned, majority-owned, and controlled organizations. Noncontrolling interests in less-than-wholly owned consolidated subsidiaries of VUMC are presented as a component of net assets to distinguish between the interests of VUMC and the interests of the noncontrolling owners. All material intercompany transactions and account balances among the various entities have been eliminated.

VUMC uses the equity method to account for its interests in unconsolidated partnerships, joint ventures, and limited liability entities over which it exercises significant influence. Investment carrying amounts are adjusted for VUMC’s share of investee earnings or losses based on percentage of ownership. Distributions received from unconsolidated entities that represent returns on VUMC’s investment (i.e., dividends) are reported as cash flows from operating activities in VUMC’s consolidated statements of cash flows.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

Use of Estimates

The preparation of consolidated financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect amounts reported in the consolidated financial statements and accompanying notes. These estimates affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the consolidated balance sheets and the reported amounts of revenues and expenses during the reporting periods. Actual results ultimately could differ from those estimates.

Cash and Cash Equivalents

Cash and cash equivalents are liquid assets with minimal interest rate risk and maturities of three months or less when purchased. VUMC invests operating assets in a diversified manner. At times, VUMC may have cash and cash equivalents at a financial institution in excess of federally insured limits, and therefore, bears a risk of loss. Certain cash and cash equivalents are included in investments and restricted cash on the consolidated balance sheets.

Liquidity and Availability

As of June 30, 2025, VUMC has \$3,092.9 million of financial assets available within one year of the balance sheet date to meet cash needs for general expenditures consisting of cash and cash equivalents of \$811.1 million, patient accounts receivable of \$864.0 million, and unrestricted investments of \$1,417.8 million. As of June 30, 2024, VUMC had \$2,749.9 million of financial assets available within one year of the balance sheet date to meet cash needs for general expenditures consisting of cash and cash equivalents of \$773.9 million, patient accounts receivable of \$789.5 million, and unrestricted investments of \$1,186.5 million. None of these financial assets are subject to donor or other contractual restrictions that make them unavailable for general expenditures within one year of the balance sheet date.

VUMC has a policy to structure its financial assets to be available as its general expenditures, liabilities, and other obligations come due. In addition, as part of its liquidity management, VUMC invests cash in excess of daily requirements in various short-term investments, including certificates of deposit and short-term treasury instruments.

As more fully described in Note 11 Long-Term Debt, VUMC also has committed lines of credit in the amount of \$450 million, which it could draw upon in the event of an unanticipated liquidity need, with no amount drawn as of June 30, 2025 or June 30, 2024.

Revenue Recognition – Patient Services

VUMC contracts with patients to provide healthcare services that are tailored to each patient's medical needs and health conditions. VUMC recognizes patient service revenue over time as performance obligations are ultimately satisfied. Performance obligations related to inpatient services are generally satisfied as the healthcare services are rendered to the patient, which generally begins at the time of patient admission and extends through the time of patient discharge. Performance obligations for outpatient services are generally satisfied on the same day that services are rendered to the patient. VUMC uses a portfolio approach consisting of major payor classes to account for categories of patient contracts as a collective group rather than recognizing revenue on an individual contract basis. Based on historical collection trends and other analysis, VUMC believes that revenue recognized by utilizing the portfolio approach approximates the revenue that would have been recognized if an individual contract approach were used.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

Patient service revenue is recognized on an accrual basis using a best estimate of the transaction price for the type of service rendered to the patient. The transaction price ultimately represents the estimated amount to be received from the patient and third-party payors in exchange for the services rendered by VUMC. VUMC estimates the transaction price based on standard charges, reduced for estimated price concessions. The price concessions include items that are explicit, such as contractual adjustments provided to third-party payors and discounts provided to uninsured and underinsured patients in accordance with VUMC policy, and implicit in nature, such as the estimated uncollectible amounts from uninsured or underinsured patients. VUMC regularly reviews transactional data for the major revenue categories to evaluate the reasonableness of the transaction price, including any price concessions, and takes into consideration recent experience by payor category and payor agreement rate changes among other factors.

VUMC carries the value of the related patient accounts receivable balances at the transaction price, inclusive of all estimated price concessions. Given the complexities involved in determining amounts ultimately due to VUMC under reimbursement arrangements with third-party payors, which are often subject to interpretation, VUMC may receive reimbursement for healthcare services authorized and provided that differs from these estimates. If actual results differ from these estimates, a change in estimate will be recorded in the period the change is identified and such differences could be material.

VUMC has elected to apply the optional exemption provided in the Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 606-10-50-14 as substantially all of its performance obligations relate to contracts with a duration of less than one year. Therefore, VUMC is not required to disclose the aggregate amount of the transaction price allocated to performance obligations that are unsatisfied or partially satisfied at the end of the reporting period. Unsatisfied or partially satisfied performance obligations are primarily related to in-house patients at the end of the reporting period. The performance obligations for these contracts are generally completed when the patient is discharged, which is typically within a week.

In addition to reimbursement received in fee-for-service arrangements, VUMC participates in certain federal healthcare programs, as well as state and commercial payor programs, through which VUMC may be entitled to additional payments. These arrangements are complex and may extend over multiple accounting periods. The arrangements are subject to the interpretation of federal and state-specific reimbursement rules, new or changing legislation, and final cost report settlements. Any changes to reimbursement rules or the introduction of new or changing legislation could impact levels and timing of reimbursements received from these programs. As a participant in these programs, VUMC is also required to meet certain financial reporting requirements which include the filing of an annual cost report for each hospital. Each annual cost report is also subjected to an audit performed by the regulatory agency and may extend several years before ultimate settlement becomes known. Therefore, determining the actual amounts earned under these programs involves judgement and estimates that may extend into future periods. These estimates are frequently evaluated and subsequently may be adjusted based on new developments or the receipt of new information related to these settlements. If actual results vary from these estimates, a change in estimate will be recorded in the period the change is identified and such differences could be material.

VUMC provides care to patients who meet the criteria for charity care under its financial assistance policy for no payment or at payment amounts less than its established charge rates. VUMC does not recognize the charges that qualify as charity care as revenue because VUMC does not pursue collection of these amounts.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

Revenue Recognition – Non-Patient Services

Revenue for non-patient services is recognized at an amount that reflects the consideration VUMC expects to be entitled in exchange for providing goods or services. The amounts recognized reflect considerations due from customers, the U.S. government, and others, and is recognized as performance obligations are satisfied. Primary categories of non-patient revenue include academic and research revenue as well as other miscellaneous activities as further described in Note 8 Other Relevant Financial Information.

VUMC receives funding through grants and contracts issued by departments and agencies of the U.S. government, industry, and other foundation sponsors who restrict the use of such funds to academic and research purposes. VUMC recognizes revenue from these grants and contracts in accordance with contract terms, as defined in the agreements governing that funding. VUMC recognizes facilities and administrative ("F&A") costs recovery as revenue when the allowable expenditure is incurred on the associated grant or contract. This activity represents reimbursement, primarily from the federal government, of F&A costs on sponsored activities.

Grants and contracts receivable include amounts due from these sponsors of externally funded research. These amounts have been billed or are billable to the sponsor and are recorded at the amount that reflects the consideration VUMC expects to receive.

Deferred Revenue

Deferred revenue is recorded for funds received in advance. The related revenue is recognized when the performance obligations have been met.

Gift Income and Pledges

VUMC recognizes unconditional promises to give cash and other assets, referred to as pledges, as gift income at fair value when the pledge is received. Conditional promises to give are recognized as pledges once the conditions are substantially met. Pledges are recognized as net assets with donor restrictions. Gifts received with donor stipulations limiting the use of the donated assets are reported as net assets with donor restrictions. Donor-restricted contributions whose restrictions are met within the same year as received are reported as gift income in the consolidated statements of operations. Gift income is recognized when a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished. Gifts of cash or other assets that must be used to acquire long-lived assets are reported as net assets with donor restrictions until the assets are placed in service, at which point they are reclassified to net assets without donor restrictions.

Pledges receivable are reported net of allowances for uncollectible amounts based on an analysis of past collection experience and other judgmental factors. Pledges receivable are included in other current or other noncurrent assets in the consolidated balance sheets based on the expected timing of cash flows. VUMC discounts the noncurrent portion of pledges receivables at a rate commensurate with the scheduled timing of receipt. VUMC applied annual discount rates ranging from 0.5% to 1.5% to amounts outstanding as of June 30, 2025 and 2024.

Concentrations of Risk

VUMC grants unsecured credit to its patients, primarily residing in Nashville, Tennessee and the surrounding areas of middle Tennessee, most of whom are insured under commercial, Medicare (both traditional fee-for-service and Managed Medicare), or TennCare agreements. Medicare, Blue Cross Blue Shield ("BCBS"), and TennCare (which includes BCBS of Tennessee, United, and Amerigroup) represent VUMC's significant concentrations of credit risk from payors.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

The collection of revenue and accounts receivables from Medicare, TennCare, BCBS, other third-party payors, and patients is a significant source of operating cash flow. The payor composition of patient service revenue and related accounts receivable portfolio may fluctuate from time to time and generally correlate to the prevailing economic conditions, such as periods of economic expansion or recession or changes in unemployment levels, and those fluctuations may impact the realization of patient service revenue and collectability of accounts receivable. Other factors such as unexpected disruptions to business office operations or trends in federal or state governmental and private employer healthcare coverage could affect the ultimate collectability of accounts receivable balances. As a result, VUMC may be exposed to gains or losses in future periods that could affect the financial position and operating cash flows of the organization and may be material to its financial position, operating income and cash flow from operations.

Inventories

VUMC reports inventories at the lower of cost or market, with cost being determined on the first-in, first-out method. Inventories consist primarily of medical supplies, surgical implants, and pharmaceuticals.

Restricted Cash

VUMC reports cash whose use is restricted at cost, which approximates fair value. The cash is primarily restricted for use in purchasing and constructing property, plant, and equipment and restricted cash associated with our self-insurance trust.

Investments

VUMC reports investments held at fair value in the consolidated balance sheets. Private credit investments, private equity investments, multi-strategy hedge funds, real estate mutual funds, and hedged equity funds are reported based on net asset value ("NAV"), provided by the respective fund manager, as a practical expedient to estimate fair value. VUMC records purchases and sales of securities on the trade dates, and realized gains and losses are determined based on the average historical cost of the securities sold. Interest income is recorded on the accrual basis and dividend income is recorded on the ex-dividend date. VUMC reports net receivables and payables arising from unsettled trades as a component of investments.

Property, Plant, and Equipment, Net

VUMC records purchases of property, plant, and equipment at cost and expenses repairs and maintenance costs as incurred. VUMC capitalizes interest cost incurred on borrowed funds during the period of construction of capital assets as a component of the cost of acquiring those assets. VUMC capitalizes donated assets at fair value on the date of donation.

Capitalized software for internal use is recorded during the application development stage. These costs include fees paid to third parties for direct costs of materials and services consumed in developing or obtaining the software that is hosted on premise; payroll related costs and capitalized interest costs. Costs for training and application maintenance in the post-implementation operation stage are expensed as incurred.

VUMC computes depreciation using the straight-line method over the estimated useful life of land improvements (5 to 18 years), buildings and leasehold improvements (2 to 40 years), and equipment (2 to 20 years). Equipment costs also include capitalized internal use software costs, which are expensed over the expected useful life, which is generally 3 to 12 years.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

Software for internal use is amortized on a straight-line basis over its estimated useful life. In determining the estimated useful life, management considers the effects of obsolescence, technology, competition, contract term, other economic factors, and rapid changes that may be occurring in the development of software products, operating systems, and computer hardware. Amortization begins once the software is ready for its intended use.

Implementation Costs Incurred on Hosting Arrangements

Implementation costs incurred on hosting arrangements are presented in other noncurrent assets on our consolidated balance sheets. The related capitalization policy is consistent with the policy described above for internal use software. Once placed into service, these assets are amortized over the term of the associated subscription agreement. These assets largely consist of costs associated with the implementation of an enterprise resource planning system, which was placed into service in April 2023.

Impairment of Long-Lived Assets

VUMC reviews long-lived assets, such as property, plant, and equipment, for impairment whenever events or changes in circumstances indicate that the carrying amount of an asset may not be recoverable. VUMC measures the recoverability of assets to be held and used by comparing the carrying amount of an asset to estimated undiscounted future cash flows expected to be generated by the asset. If the carrying amount of an asset exceeds its estimated future cash flows, VUMC recognizes an impairment charge to the extent the carrying amount of the asset exceeds its fair value.

Long-Term Debt

The carrying value of VUMC's debt is the par amount adjusted for the net unamortized amount of debt issuance costs and bond premiums and discounts.

Interest Rate Exchange Agreements

VUMC reports interest rate exchange agreements at fair value, which is determined to be the present value of future net cash settlements that reflect market yields as of the measurement date and estimated amounts that VUMC would pay, or receive, to terminate the contracts as of the report date. VUMC considers current interest rates and creditworthiness of the interest rate exchange counterparties when estimating termination settlements.

Self-Insurance Reserves

VUMC elects to self-insure a portion of its medical malpractice, other professional, and general liability coverage via an irrevocable self-insurance trust. For Fiscal 2025 and 2024, the maximum annual self-insurance retention was \$6.0 million per occurrence, up to \$46.0 million in the aggregate. Actuarial firms assist management in estimating expected losses on an annual basis, at which time VUMC records medical malpractice, other professional, and general liability expense within the limits of the program. These liabilities are classified as current or noncurrent based on the expected timing of cash flows and are measured at the net present value of those cash flows using a discount rate of 4.0% as of June 30, 2025 and 2024. For both Fiscal 2025 and 2024, VUMC obtained excess medical malpractice, other professional, and general liability coverage from commercial insurance carriers for claims exceeding the retention limits, up to \$175.0 million. These policies would also provide coverage up to \$175.0 million if any claims in the aggregate exceeded the retention limits.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

Employee Health and Workers' Compensation Insurance

VUMC also elects to self-insure for employee health and workers' compensation expenses. Actuarial firms assist management in estimating expected losses on an annual basis. During Fiscal 2025, VUMC obtained stop-loss coverage for the health plan. The coverage has a \$2 million deductible per occurrence. The maximum retention for workers' compensation was \$0.8 million per occurrence for both Fiscal 2025 and 2024.

Income Taxes

VUMC is a tax-exempt organization as described in Section 501(c)(3) of the Internal Revenue Code (the "Code") and is generally exempt from federal income taxes under Section 501(a) of the Code.

Excess of Revenues Over Expenses

The consolidated statements of operations include excess of revenues over expenses as a performance indicator. Excess of revenues over expenses includes all changes in net assets without donor restrictions, except for changes in noncontrolling interest holders' share of consolidated entities, net assets released from restrictions used for capital, and certain other items.

Statement of Cash Flows

For VUMC's consolidated statements of cash flows, cash, cash equivalents, and restricted cash is defined as those amounts included in the cash and cash equivalents caption and restricted cash caption on the consolidated balance sheets.

3. Related Parties

On April 29, 2016, VUMC acquired the assets, liabilities, rights, and obligations of the clinical enterprise, post-graduate medical training programs, and clinically related research of the University's owned and operated Medical Center through the Acquisition.

The assets acquired and liabilities assumed from the Acquisition were detailed in a Master Transfer and Separation Agreement ("MTSA"). The MTSA contains the framework for the ongoing economic relationship between VUMC and the University. The relationship is memorialized in the form of an Academic Affiliation Agreement ("AAA"), a Trademark License Agreement ("TMLA"), a Ground Lease, and a Reciprocal Master Services Agreement ("MSA"). The agreements are described below.

- The AAA outlines the ongoing academic, research, and clinical affiliation between the University and VUMC for all the University's degree-granting, certificate, and research programs. The AAA allocates responsibility between the University and VUMC for jointly administered research and academic programs and is an exclusive agreement between VUMC and VU requiring VUMC to be organized, governed, and operated in a manner that supports VU's academic and research mission. The agreement provides that VU will be the exclusive academic affiliate of VUMC, and VUMC will be the exclusive clinical affiliate of VU.
- The AAA requires VUMC to pay VU an annual fee in equal monthly payments adjusted annually for inflation based upon the Biomedical Research and Development Price Index in perpetuity under certain mutually agreed-upon termination or default clauses. During Fiscal 2025 and 2024, VUMC recorded operating expense totaling \$88.4 million and \$85.1 million, respectively, in connection with fees due under the AAA.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

- Under the TMLA, VU grants, subject to certain consents and approvals, a perpetual license to use various VU-owned licensed marks in connection with VUMC's fundamental activities after the Acquisition date. The licensed marks, which VUMC continues to use as its primary brands, include virtually all those previously in use by VUMC. This agreement requires VUMC to pay VU royalties consisting of a monthly payment equal to 1% of all operating revenue of VUMC and 15% of income from operations. During Fiscal 2025 and 2024, VUMC recorded operating expense totaling \$129.4 million and \$103.1 million, respectively, in connection with the 1% of operating revenue and 15% of operating income payments due under the TMLA. Also, VUMC is required to pay, in equal monthly installments, an annual TMLA base fee royalty, which increases 3% annually, but is also reduced by the amount of principal payments made under a subordinated note discussed in Note 11 Long-Term Debt. During Fiscal 2025 and 2024, VUMC recorded operating expense totaling \$73.3 million and \$71.0 million, respectively, in connection with this base fee royalty. In Fiscal 2018, VU sold its rights to future base fee royalty payments to a third party. In Fiscal 2019, VU sold its rights to future 1% of operating revenue payments to a third party. The TMLA is in force in perpetuity under certain mutually agreed-upon termination or default clauses.
- The Ground Lease is an agreement between VU and VUMC that allows VUMC to use the land on which VUMC's campus and related buildings are located. The initial term of the Ground Lease ends June 30, 2114, with the option to extend the lease for two additional terms of up to 50 to 99 years each with agreement between VU and VUMC. The lease covers 1.7 million square feet, or 38.75 acres, of space, payable monthly and adjusted annually based upon the Consumer Price Index ("CPI"). During Fiscal 2025 and 2024, VUMC recorded operating expense totaling \$24.1 million and \$23.3 million, respectively, in connection with fees due under the Ground Lease.
- The University and VUMC provide services to one another for agreed-upon consideration as outlined in the MSA. VU provides services to VUMC, such as information technology infrastructure support, utilities, and law enforcement staffing. VUMC provides various operational services for the University, such as a student health clinic and animal care. Additionally, the MSA encompasses an Employee Matters Agreement ("EMA") and specific Employee Service Agreements ("ESAs"). The EMA and ESAs govern employee transactions and ongoing sharing between VU and VUMC in various capacities, such as research, teaching, clinical, and other administrative services. Services under the MSA can be terminated by either party subject to predetermined cancellation notification periods. In connection with the MSA, during Fiscal 2025 and 2024, VUMC recognized revenue totaling \$49.7 million and \$48.3 million, respectively, and recorded operating expense totaling \$131.5 million and \$124.7 million, respectively.
- Also, as part of the Acquisition, VUMC issued to VU a \$100.0 million subordinated promissory note payable, which is further described in Note 11 Long-Term Debt, with a balance of \$54.6 million as of June 30, 2025, and \$59.6 million as of June 30, 2024. VU sold its rights to future principal and interest payments on this note to a third party.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

The impact of these agreements in the consolidated statements of operations during Fiscal 2025 and 2024 is as follows:

<i>(\$ in thousands)</i>	2025	2024
Academic and research revenue	\$ 16,221	\$ 15,188
Other operating revenue	33,459	33,138
Total operating revenues	<u>\$ 49,680</u>	<u>\$ 48,326</u>
Operating expenses		
Salaries, wages, and benefits	\$ 12,740	\$ 10,962
Facilities and equipment	66,821	65,615
Services and other	367,141	330,654
Interest	1,848	2,011
Total operating expenses	<u>\$ 448,550</u>	<u>\$ 409,242</u>

Other current assets include amounts receivable from VU, which totaled \$6.6 million as of June 30, 2025, and \$6.7 million as of June 30, 2024. Accounts payable and other accrued expenses include amounts payable to related parties, which totaled \$80.1 million and \$64.3 million as of June 30, 2025 and 2024, respectively.

In the normal course of business, members of VUMC's Board of Directors or VUMC employees may be directly or indirectly associated with companies engaged in business activities with VUMC. VUMC has a written conflict of interest policy that requires, among other things, that members of the VUMC community (including trustees) may not review, approve, or administratively control contracts or business relationships when (i) the contract or business relationship is between VUMC and a business in which the individual or a family member has a material financial interest, or (ii) the individual or a family member is an employee of the business and is directly involved with activities pertaining to VUMC.

Furthermore, VUMC's conflict of interest policy extends beyond the foregoing business activities in that disclosure is required for any situation in which an applicable individual's financial, professional, or other personal activities may directly or indirectly affect, or have the appearance of affecting, an individual's professional judgment in exercising any VUMC duty or responsibility, including the conduct or reporting of research.

The policy extends to all individual members of the VUMC community (including Board of Directors, VUMC officials, full-time, part-time, temporary faculty and staff). Each applicable person is required to certify compliance with the conflict of interest policy on an annual basis. This certification includes specifically disclosing whether VUMC conducts business with an entity in which he or she (or an immediate family member) has a material financial interest, as well as any other situation that could appear to present a conflict with VUMC's best interests.

When situations exist relative to the conflict of interest policy, VUMC takes active measures to appropriately manage the actual or perceived conflict in the best interests of VUMC, including periodic reporting of measures taken to the Audit and Compliance Committee of the Board of Directors.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

4. Patient Service Revenue, Patient Accounts Receivable, and Estimated Third-Party Settlements

The sources of patient service revenue by payor for Fiscal 2025 and 2024 are as follows:

(\$ in thousands)	2025	2024
Other third-party payors, primarily commercial carriers	\$ 4,467,588	\$ 4,017,088
Medicare/Managed Medicare	1,813,831	1,605,086
TennCare/Medicaid	1,083,751	857,528
Uninsured (self-pay)	78,917	76,860
	<u>\$ 7,444,087</u>	<u>\$ 6,556,562</u>

Patient accounts receivable comprises amounts due from the following sources as of June 30, 2025 and 2024:

(\$ in thousands)	2025	2024
Medicare/Managed Medicare	\$ 149,094	\$ 143,121
TennCare/Medicaid	91,090	111,267
Blue Cross	201,774	163,574
Other third-party payors, primarily commercial carriers	355,389	308,072
Patient responsibility ⁽¹⁾	66,648	63,500
Patient accounts receivable	<u>\$ 863,995</u>	<u>\$ 789,534</u>

⁽¹⁾ Includes self-pay after insurance.

Estimated third-party settlements by major payor category as of June 30, 2025 and 2024 are as follows:

(\$ in thousands)	2025	2024
Receivables under third-party programs		
TennCare directed payment	\$ 178,983	\$ —
Tricare/Champus ⁽¹⁾	6,907	5,854
Total receivables under third-party programs	<u>\$ 185,890</u>	<u>\$ 5,854</u>
Liabilities under third-party programs		
TennCare/Medicaid	\$ 60,952	\$ 99,842
Medicare ⁽¹⁾	19,527	15,998
Total liabilities under third-party programs	<u>\$ 80,479</u>	<u>\$ 115,840</u>

⁽¹⁾ These two federal healthcare programs are combined for presentation purposes on the face of the consolidated balance sheets and are included in estimated liabilities under third-party programs in Fiscal 2025 and 2024.

Certain contracts require pay for performance or episode of care settlements whereby VUMC receives additional payment or pays a penalty based on its ability to achieve certain clinical measures or manage the cost of care for patients within various thresholds. VUMC estimates and accrues these adjustments in the period the related services are rendered and adjusts these estimates in future periods as settlements are finalized.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

Medicare

Amounts received under Medicare are subject to review and final determination by program intermediaries or their agents. Final settlements have been reached for program periods ended June 30, 2018. Final settlements have not been reached for subsequent years due to audit delays experienced with the Medicare Administrative Contractor, and thus, those periods remain subject to audit by program representatives.

TennCare

TennCare is a Medicaid managed care program implemented by the state of Tennessee to provide healthcare coverage to those patients eligible for Medicaid. The state of Tennessee has implemented a fully managed demonstration project under the authority of the Social Security Act, 42 CFR 431, section 1115(a)2, known as a Federal 1115 Waiver Program. VUMC privately contracts with each of the three TennCare managed care organizations ("MCOs") to provide clinical services to enrollees. VUMC receives inpatient reimbursement through payments that are primarily based on the Medicare severity diagnostic related group system ("MS-DRG") for these plans. VUMC receives outpatient payments generally based on an ambulatory payment classification system ("APC"), and/or a payor-developed fee schedule.

In addition to the fee for service payments described above, VUMC receives supplemental payments from TennCare. These payments support graduate medical education, charity care, and the unreimbursed costs of TennCare fee for service payments. During Fiscal 2024, VUMC received \$123.2 million of managed care organization supplemental payments directed from TennCare which covers a uniform increase for inpatient and outpatient services rendered for the period January 1, 2024 through December 31, 2024. During Fiscal 2024, VUMC recognized \$82.9 million as patient service revenue related to the services rendered for the period January 1, 2024 through June 30, 2024. The remaining \$40.3 million of payments received during Fiscal 2024 was deferred and included in the current liability section as an estimated liability under third-party programs in the consolidated balance sheet as of June 30, 2024. During Fiscal 2025, VUMC received additional supplemental payments of \$42.6 million related to the calendar year 2024 service period, and recognized the remaining \$82.9 million as patient service revenue related to the services performed for the period July 1, 2024 through December 31, 2024.

Additionally, in Fiscal 2025, TennCare received approval to proceed with its Hospital Investment Program ("HIP"), which expands the Directed Payment Pool funding available to Tennessee hospitals and modifies the distribution methodology among those hospitals using an average commercial rate approach. These directed payments as approved under HIP supplement TennCare reimbursement for services rendered during the service period July 1, 2024 through June 30, 2025. VUMC recognized \$179.0 million of directed payments attributable to HIP in Fiscal 2025. This amount is presented as TennCare directed payment receivable in the consolidated balance sheet as of June 30, 2025. The cash was received subsequent to June 30, 2025.

There is no assurance that these programs will be continued in their current structure or will not be materially modified in the future.

Vanderbilt University Medical Center
Notes to Consolidated Financial Statements
June 30, 2025 and 2024

In Fiscal 2025 and 2024, patient service revenue includes the following supplemental amounts in each respective period from TennCare:

<i>(\$ in thousands)</i>	<u>2025</u>	<u>2024</u>
Directed payments	\$ 261,919	\$ 82,936
Charity pool	60,440	23,515
Graduate medical education	17,453	18,540
Trauma fund	1,955	2,057
Workforce development and other	978	945
Virtual disproportionate share	11,253	9,497
Total supplemental TennCare revenue	<u>\$ 353,998</u>	<u>\$ 137,490</u>

5. Charity Care Assistance, Community Benefits, and Other Unrecovered Costs

VUMC maintains a policy which sets forth the criteria under which health care services are provided to patients who have minimal financial resources to pay for medical care. Additionally, VUMC provides other services that benefit the economically disadvantaged, for which little or no payment is expected.

Charity care is determined by examining patient and family income relative to the federal poverty guidelines. VUMC provides additional discounts based on the income level of the patient household using a sliding scale for those patients with a major catastrophic medical event not qualifying for full charity assistance. Tennessee law mandates that all uninsured patients receive a discount from billed charges for medically necessary services. These amounts are classified as charity care if the patient meets charity care criteria, for which no revenue is recorded, or are included as a part of price concessions.

VUMC maintains records to identify and monitor the level of charity care provided. These records include gross charges and patient deductibles, coinsurance and copayments foregone for services furnished under its charity care policy, and the estimated cost of those services. VUMC calculates a ratio of total costs to gross charges and then multiplies the ratio by foregone charity care charges in determining the estimated cost of charity care. The gross amount of foregone charity care revenue in Fiscal 2025 and 2024 totals \$883.3 million and \$671.4 million, respectively. The estimated cost of providing care to charity patients in Fiscal 2025 and 2024 totals \$237.2 million and \$177.1 million, respectively.

In addition to the charity care services described above, TennCare/Medicaid and state indigent programs do not cover the full cost of providing care to beneficiaries of those programs. As a result, in addition to direct charity care costs, VUMC provided services related to TennCare/Medicaid and state indigent programs and was reimbursed substantially below the cost of rendering such services. VUMC also provides public health education and training for new health professionals and provides, without charge, services to the community at large for many patients with special needs.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

6. Academic and Research Revenue

Academic and research revenue comprises the following for Fiscal 2025 and 2024:

<i>(\$ in thousands)</i>	2025	2024
Grants and contracts revenue		
Federally funded	\$ 446,462	\$ 438,448
Non-federally funded	114,703	116,858
	561,165	555,306
Facilities and administrative costs recovery	203,502	208,337
Total grants and contracts revenue	764,667	763,643
Other academic and research revenue	64,945	59,135
Academic and research revenue	<u>\$ 829,612</u>	<u>\$ 822,778</u>

7. Pledges Receivable, Net

Pledges receivable, net of applied discounts and allowance for uncollectible pledges, as of June 30, 2025 and 2024, were as follows:

<i>(\$ in thousands)</i>	2025	2024
Amounts due		
Within one year	\$ 12,873	\$ 10,806
In one to five years	23,334	24,148
Total pledges receivable	36,207	34,954
Unamortized discount	(1,087)	(951)
	35,120	34,003
Allowance for uncollectible pledges	(5,431)	(4,195)
Net pledges receivable	<u>\$ 29,689</u>	<u>\$ 29,808</u>
Net pledges receivable classified as		
Current	\$ 8,728	\$ 8,518
Noncurrent	20,961	21,290
	<u>\$ 29,689</u>	<u>\$ 29,808</u>

In addition to pledges reported as pledges receivable, VUMC had cumulative bequest intentions and conditional promises to give totaling \$176.5 million and \$165.9 million as of June 30, 2025 and 2024, respectively. Due to their conditional nature, VUMC does not recognize intentions to give as assets. Pledges receivable are presented in other current assets and other noncurrent assets on our consolidated balance sheets, as shown in Note 8.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

8. Other Relevant Financial Information

Other current assets comprise the following as of June 30, 2025 and 2024:

<i>(\$ in thousands)</i>	2025	2024
Prepaid expenses	\$ 40,888	\$ 32,125
Other receivables	58,348	52,520
Amounts due from VU (see Note 3 Related Parties)	6,614	6,682
Current pledges receivable, net (see Note 7 Pledges Receivable, Net)	8,728	8,518
Expected recoveries from commercial insurance excess coverage	4,718	4,846
Total other current assets	<u>\$ 119,296</u>	<u>\$ 104,691</u>

Other noncurrent assets comprise the following as of June 30, 2025 and 2024:

<i>(\$ in thousands)</i>	2025	2024
Equity in unconsolidated organizations	\$ 79,103	\$ 72,429
Noncurrent pledges receivable, net (see Note 7 Pledges Receivable, Net)	20,961	21,290
Goodwill	27,028	27,028
Implementation costs incurred on hosting arrangements	39,401	42,132
Other	13,843	12,478
Total other noncurrent assets	<u>\$ 180,336</u>	<u>\$ 175,357</u>

Implementation costs incurred on hosting arrangements include accumulated amortization of \$9.8 million and \$5.3 million as of June 30, 2025 and 2024, respectively. Amortization expense amounted to \$4.5 million and \$4.4 million for Fiscal 2025 and 2024, respectively. Amortization expense for each of the next five years is approximately \$4.8 million.

Other operating revenue comprises the following for Fiscal 2025 and 2024:

<i>(\$ in thousands)</i>	2025	2024
Clinical contracts	\$ 70,584	\$ 54,190
Amounts recognized under MSA with VU (see Note 3 Related Parties)	33,459	33,138
Nonclinical contracts	29,249	41,499
VHS other revenue	27,420	26,629
Café and gift shop sales	10,913	9,408
Resident and house staff rotations	9,905	9,582
Shared savings revenue	9,517	1,925
Study residuals	8,182	6,840
Parking revenue	7,858	7,947
Academic cores and contracts	4,983	5,048
Other	28,597	27,886
Total other operating revenue	<u>\$ 240,667</u>	<u>\$ 224,092</u>

Vanderbilt University Medical Center
Notes to Consolidated Financial Statements
June 30, 2025 and 2024

9. Investments

VUMC investments are made up of current investments, restricted cash, noncurrent investments, and noncurrent investments limited as to use on the face of the consolidated balance sheets. VUMC investments include assets limited as to use related to the following specified purposes as of June 30, 2025 and 2024:

(\$ in thousands)	2025	2024
Self-insurance trust	\$ 60,244	\$ 54,889
Donor endowments	177,056	129,264
Split-interest trusts	10,319	9,482
Supplemental employee retirement program assets	13,431	16,083
	<u>\$ 261,050</u>	<u>\$ 209,718</u>

VUMC’s endowment does not include gift annuities, interests in trusts held by others, contributions pending donor designation, or contributions receivable.

The Board of Directors’ interpretation of its fiduciary responsibilities for donor-restricted endowments under the Uniform Prudent Management of Institutional Funds Act (“UPMIFA”) requirements is to preserve intergenerational equity, barring the existence of any donor-specific provisions. Under this broad guideline, future endowment beneficiaries should receive at least the same level of real economic support as the current generation. The overarching objective is to preserve and enhance the real (inflation-adjusted) purchasing power of the endowment in perpetuity. VUMC invests assets to provide a relatively predictable and stable stream of earnings to meet spending needs and attain long-term return objectives without the assumption of undue risks.

Self-insurance trust – VUMC elects to self-insure a portion of its medical malpractice, professional, and general liability via an irrevocable trust.

Donor endowments – Donor-restricted gifts where the principal amount is to be held in perpetuity. Distributions of earnings are restricted for use according to the donor’s intent, as specified in a gift agreement. Donor endowments typically benefit specific programs in clinical departments of the Medical Center for either research, directorships, or general program support.

Split-interest trusts – Trusts established by donors where VUMC is named as beneficiary. Depending on the terms of the trust, VUMC may receive periodic distributions, and potentially a principal amount at some point in the future. Like donor endowments, split-interest trusts typically benefit specific programs as defined in the terms of the trust.

Supplemental executive retirement program assets – Assets set aside to fulfill obligations as they come due according to the terms of the retirement program.

Vanderbilt University Medical Center
Notes to Consolidated Financial Statements
June 30, 2025 and 2024

Investments were as follows as of June 30, 2025 and 2024:

<i>(\$ in thousands)</i>	2025	2024
Corporate bonds	\$ 522,064	\$ 411,001
Equity mutual funds	193,142	173,134
Cash and cash equivalents	334,271	71,569
Split-interest trusts	10,319	9,482
Hedged equity mutual funds	20,354	34,112
Fixed income mutual funds	178,857	166,465
Mortgage-backed securities	177,756	129,645
Government bonds	131,733	100,610
Hedged debt mutual funds	46,189	61,750
Commodities and managed futures mutual funds	15,952	15,765
Target date mutual funds	10,439	12,807
Equity securities	174,910	135,671
Total investments reported at fair value	1,815,986	1,322,011
Private credit	18,549	15,426
Private equity	67,113	56,454
Multi-strategy hedge funds	48,960	25,075
Real estate mutual funds	40,836	37,512
Hedged equity funds	38,872	21,482
Total investments reported at net asset value	214,330	155,949
Total investments	<u>\$ 2,030,316</u>	<u>\$ 1,477,960</u>

Investment returns comprise the following elements for Fiscal 2025 and 2024:

<i>(\$ in thousands)</i>	2025	2024
Interest and dividend income	\$ 76,266	\$ 64,083
Net realized gains on sales of securities	5,219	12,188
Realized investment gains	81,485	76,271
Unrealized investment gains, net	69,370	47,815
Total investment returns	150,855	124,086
Investment manager, trustee, and other fees	1,509	(25)
Restricted investment income	(15,530)	(13,051)
Total income from investments, net	<u>\$ 136,834</u>	<u>\$ 111,010</u>

VUMC has exposure to risks, including liquidity, interest rate, counterparty, basis, regulatory, market, and credit risks, for marketable securities. Due to the level of risk exposure, it is possible that material near-term valuation changes for investment securities may occur.

VUMC manages all investments, including endowments, in various investment pools.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

10. Property, Plant, and Equipment, Net

Property, plant, and equipment, net comprise the following as of June 30, 2025 and 2024:

<i>(\$ in thousands)</i>	2025	2024
Land and land improvements	\$ 53,122	\$ 52,998
Buildings and improvements	1,614,318	1,475,873
Equipment and software	1,113,399	994,042
Leasehold improvements	244,036	211,612
Construction in progress	518,791	307,085
Property, plant, and equipment at cost	3,543,666	3,041,610
Accumulated depreciation and amortization	(1,291,965)	(1,094,597)
Property, plant, and equipment, net	<u>\$ 2,251,701</u>	<u>\$ 1,947,013</u>

As part of the MTSA, VUMC acquired land and land improvements and buildings and improvements which are not allowed to be repurposed without the express consent of VU.

In Fiscal 2025 and 2024, VUMC capitalized interest of \$27.2 million and \$12.5 million, respectively, related to long-term capital projects, primarily the VUH bed tower, the VUH kitchen renovation, and the build-out of two unfinished floors at Monroe Carell in Fiscal 2025.

Property, plant, and equipment, net balances above include the following amounts related to capitalized internal use software:

<i>(\$ in thousands)</i>	2025	2024
Equipment and software	\$ 230,201	\$ 225,882
Construction in progress	9,387	4,930
	239,588	230,812
Accumulated amortization	(150,734)	(127,580)
Internal use software, carrying value	<u>\$ 88,854</u>	<u>\$ 103,232</u>

Depreciation and amortization comprise the following amounts in Fiscal 2025 and 2024:

<i>(\$ in thousands)</i>	2025	2024
Depreciation of tangible assets	\$ 174,931	\$ 158,110
Amortization of finance leases, leasehold improvements, and internal use software	45,591	46,683
Total depreciation and amortization	<u>\$ 220,522</u>	<u>\$ 204,793</u>

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

11. Long-Term Debt

Long-term debt comprises the following as of June 30, 2025 and 2024:

(\$ in thousands)	<u>2025</u> <u>Carrying</u> <u>Amount</u>	<u>2024</u> <u>Carrying</u> <u>Amount</u>	<u>Effective</u> <u>Interest</u> <u>Rate</u> ⁽¹⁾	<u>Fiscal</u> <u>Year of</u> <u>Maturity</u>
Series debt				
Fixed-rate debt				
Series 2016A	\$ 476,930	\$ 476,930	4.2%	2047
Series 2016B	300,000	300,000	4.1%	2027
Series 2017A	121,270	121,270	4.2%	2049
Series 2017	100,000	100,000	4.2%	2038
Series 2021A	57,860	57,860	1.8%	2032
Series 2021B	237,565	237,565	3.2%	2053
Series 2023A	145,145	145,145	4.3%	2034
Series 2024A	411,290	—	3.1%	2035
Total fixed-rate debt	<u>1,850,060</u>	<u>1,438,770</u>	3.8%	
Variable-rate debt				
Series 2016F	15,345	17,615	5.1%	2042
Series 2018	—	53,385	4.6%	
Series 2021C	50,000	50,000	5.4%	2047
Series 2022A	—	70,500	4.1%	
Series 2022B	70,500	70,500	3.7%	2056
Series 2025A	193,885	—	0.6%	2055
Total variable-rate debt	<u>329,730</u>	<u>262,000</u>	4.2%	
Total series debt	<u>2,179,790</u>	<u>1,700,770</u>		
Other long-term debt				
2019 Term Loan	34,065	35,000	5.3%	2050
2019 Notes	128,600	128,600	3.9%	2055
Subordinated note payable	54,583	59,583	3.2%	2036
Product financing arrangement	6,818	11,687	4.3%	2027
Finance leases	12,581	10,058	3.9%	Various
Other	2,575	5,150	0.0%	2026
Total other long-term debt	<u>239,222</u>	<u>250,078</u>	3.9%	
Subtotal	<u>2,419,012</u>	<u>1,950,848</u>	3.8%	
Net unamortized premiums	103,349	64,472		
Net unamortized issuance costs	<u>(14,083)</u>	<u>(12,464)</u>		
Total long-term debt	<u>2,508,278</u>	<u>2,002,856</u>		
Current portion of long-term debt	<u>(19,428)</u>	<u>(19,186)</u>		
Long-term debt, net of current portion	<u>\$ 2,488,850</u>	<u>\$ 1,983,670</u>		

⁽¹⁾ The effective interest rate for each debt instrument is calculated by dividing each instrument's interest expense by the weighted average debt outstanding, and where applicable, interest expense is reduced by premium amortization and increased by original issue discount amortization. Interest rates per the agreements are detailed in the accompanying notes.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

On April 29, 2016, VUMC issued the Series 2016 A, B, C, D, E, and F bonds ("2016 Series Debt") and notes aggregating \$1.3 billion of proceeds for the purpose of financing the Medical Center Acquisition and paying a portion of the costs of issuance associated with the 2016 Series Debt.

The bonds and notes comprising the 2016 Series Debt were issued by the Health and Educational Facilities Board of The Metropolitan Government of Nashville and Davidson County, Tennessee ("HEFB"). As a conduit issuer, the HEFB loaned the debt proceeds to VUMC. VUMC's debt service requirements under these loan agreements coincide with required debt service of the actual HEFB bonds.

- The Series 2016A tax-exempt fixed-rate revenue bonds were issued in the par amount of \$476.9 million and include an original issue premium of \$59.6 million. The Series 2016A bonds have a final maturity date of July 1, 2046, and can be optionally redeemed at par on or after July 1, 2026. The 2016A bonds were structured as serial bonds with maturities from Fiscal 2030 through 2032, as well as three term bonds maturing Fiscal 2036 through 2047, which are subject to mandatory sinking fund redemption in lots. The Series 2016A bonds bear interest at 5% per annum and pay interest semiannually on July 1 and January 1.
- The Series 2016B taxable fixed-rate revenue bonds were issued in the par amount of \$300 million, bearing interest at 4.1% per annum. Interest is paid semiannually on July 1 and January 1, and has a bullet maturity of July 1, 2026. VUMC is entitled, at its option, to redeem all or a portion of the Series 2016B bonds before April 1, 2026, at a make-whole redemption price, which equals the greater of (i) 100% of the remaining outstanding principal and (ii) the net present value of the remaining scheduled principal and interest payments to the original maturity date, using a discount rate of 0.35% above rates for U.S. Treasury securities with comparable maturities.
- The Series 2016F taxable variable-rate revenue bonds were issued in the par amount of \$75 million and were placed privately with a bank. The bonds bore interest in a variable-rate mode at a fixed spread to one-month LIBOR of 2.5% through the initial mandatory tender date of July 1, 2022. During Fiscal 2018, \$53.1 million of the Series 2016F bonds were extinguished using proceeds from the 2018 tax-exempt fixed-rate revenue bonds, discussed further below. The renegotiated interest rate on the remaining \$21.9 million of principal outstanding was a variable-rate mode at a fixed spread to one-month LIBOR of 1.2%. During Fiscal 2022, the Series 2016F taxable variable-rate revenue bonds were modified and the renegotiated interest rate is a variable-rate mode at a fixed spread to SOFR of 0.8%. The remaining principal has a mandatory tender date of December 1, 2028. Beginning on July 1, 2022, VUMC began paying required annual principal payments ranging from \$2.1 million to \$2.7 million. The remaining \$5.3 million of principal is due on December 1, 2028.
- Prior to Fiscal 2022, Series 2016 C, D and E bonds were extinguished.

On July 26, 2017, the Series 2017A Tax-Exempt and Series 2017 Taxable Corporate Bonds were issued, and on August 1, 2017, the Series 2017B Taxable Revenue Bonds were issued ("2017 Series Debt"), aggregating \$271.3 million of proceeds for the purpose of refinancing existing debt, funding capital projects related to the Monroe Carell expansion and the VUH bed expansion/clinical relocation, which was a phased project, and paying a portion of the costs of issuance associated with the 2017 Series Debt.

The Series 2017A Tax-Exempt Revenue Bonds and the Series 2017B Taxable Term Loan Revenue Note were issued by the HEFB. The Series 2017 Taxable Bonds were a corporate issue with VUMC as the issuer.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

- The Series 2017A tax-exempt fixed-rate revenue bonds were issued in the par amount of \$121.3 million and include an original issue premium of \$5.1 million. The final maturity date is July 1, 2048, and optional redemption at par can occur on or after July 1, 2027. The Series 2017A bonds bear interest at 4.4% per annum and pay interest semiannually on July 1 and January 1.
- The Series 2017 taxable fixed-rate corporate bonds were issued in the par amount of \$100.0 million, bearing interest at 4.2% per annum. Interest is paid semiannually on July 1 and January 1, and the bonds have a final maturity date of July 1, 2037. There is a bullet payable beginning July 1, 2026, that allows VUMC to call the debt.
- During Fiscal 2022, the Series 2017B notes were extinguished using proceeds from the Series 2021C Taxable Revenue Bonds, discussed further below.

On April 20, 2018, the Series 2018 Tax-Exempt Revenue Bonds ("2018 Series Debt") aggregating \$53.4 million of proceeds were issued for the purpose of refinancing existing debt and paying a portion of the costs of issuance associated with the 2018 Series Debt. The Series 2018 Tax-Exempt Revenue Bonds were issued by the HEFB, were placed privately with a bank, and bear interest at a fixed spread of 79% of SOFR plus 0.76%. The bonds have a final maturity date of July 1, 2049. Proceeds from the issuance of the Series 2018 bonds were used to extinguish a portion of the Series 2016F taxable variable-rate bonds. Series 2018 was redeemed in full, with the issuance of Series 2025A on June 25, 2025.

On July 30, 2019, VUMC entered into a term loan agreement ("2019 Term Loan") with a lender for \$35 million to pay for the acquisition of Tennova – Lebanon (now VWCH) hospital facilities, near term capital expenditures, and costs of issuance. The term loan bore interest at a variable rate plus a fixed spread to one-month LIBOR of 0.50% through the maturity date of August 1, 2029. Due to LIBOR being sunset as the benchmark rate, the interest rate was modified during Fiscal 2023 to SOFR plus a fixed spread of 0.60%. VUMC has the option to prepay all or a portion of the loan at any time, subject to notice. The 2019 loan is subject to principal amortization commencing on July 1, 2024 and ending July 1, 2049, as defined in the 2019 loan agreement between VUMC and the lender.

On October 22, 2019, the 2019 Taxable Fixed Private Placement Notes ("2019 Notes") aggregating \$128.6 million of proceeds were issued for the purpose of refinancing existing debt and paying a portion of the costs of issuance associated with the 2019 Notes. The 2019 Notes were placed privately with a bank, and bear interest at a fixed rate of 3.9% per annum. The notes have a final maturity date of July 1, 2054.

On November 4, 2021, the Series 2021A Tax-Exempt and Series 2021B Taxable Revenue Bonds were issued, and on December 1, 2021, the Series 2021C Taxable Revenue Bonds were issued ("2021 Series Debt"), aggregating \$345.4 million of proceeds for the purpose of refinancing existing debt, funding capital projects, and paying a portion of the costs of issuance associated with the 2021 Series Debt. The 2021 Series was issued by the HEFB.

- The Series 2021A tax-exempt fixed-rate revenue bonds were issued in the par amount of \$57.9 million and include an original issue premium of \$16.2 million. The Series 2021A bonds have a bullet maturity of July 1, 2031, and can be optionally redeemed at par on or after January 1, 2031. The Series 2021A bonds bear interest at 5% per annum and pay interest semiannually on July 1 and January 1.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

- The 2021B taxable fixed-rate revenue bonds were issued in the par amount of \$237.6 million, bearing interest at 3.2% per annum, which is paid semiannually on July 1 and January 1. The 2021B bonds have a final maturity of July 1, 2052 and are subject to mandatory sinking fund redemption in lots. VUMC is entitled, at its option, to redeem all or a portion of the Series 2021B bonds before January 1, 2052, at a redemption price, which equals the greater of (i) 100% of the remaining outstanding principal and (ii) the net present value of the remaining scheduled principal and interest payments to the original maturity date, using a discount rate of 0.20% above rates for U.S. Treasury securities with comparable maturities.
- The 2021C taxable variable-rate revenue bonds were issued in the par amount of \$50 million and were placed privately with a bank. The bonds bore interest in a variable-rate mode at a fixed spread to one-month LIBOR of 0.5%. Due to LIBOR being sunset as the benchmark rate, the interest rate was modified during Fiscal 2023 to SOFR plus a fixed spread of 0.63%. The bonds have a final maturity date of July 1, 2046, a tender date of December 1, 2027, and may be redeemed at any time. Proceeds from the issuance of the Series 2021C bonds were used to extinguish the Series 2017B notes.

On December 7, 2022, the Series 2022A and Series 2022B Tax-Exempt Revenue Bonds were issued for \$70.5 million each. The proceeds were used to fund capital projects, and to pay a portion of the costs of issuance. The bonds bear interest at SIFMA plus a fixed spread of 0.70% and 0.67%, respectively. The 2022 Series was issued by the HEFB. Series 2022A was redeemed in full, with the issuance of Series 2025A on June 25, 2025.

On November 8, 2023, the Series 2023A Tax-Exempt Revenue Bonds were issued by the HEFB in the par amount of \$145.1 million and include an original issue premium of \$6.1 million. The proceeds were used to fund capital projects, and to pay a portion of the costs of issuance. The Series 2023A bonds bear interest at 5% per annum and pay interest semiannually on July 1 and January 1.

On October 29, 2024, the Series 2024A Tax-Exempt Revenue Bonds were issued by the HEFB in the par amount of \$411.3 million and include an original issue premium of \$48.1 million. The proceeds were used to fund capital projects, and to pay a portion of the costs of issuance. The Series 2024A bonds bear interest at 5% per annum and pay interest semiannually on July 1 and January 1.

On June 25, 2025, the Series 2025A Tax-Exempt Revenue Bonds were issued by the HEFB in the par amount of \$193.9 million. The proceeds were used to fund capital projects, extinguish the 2018 Series Debt and Series 2022A bonds, and to pay a portion on the costs of issuance. The Series 2025A bonds bear interest at SIFMA plus a fixed spread of .55% per month.

Each of the bonds, notes, and loans represent separate obligations under a Master Trust Indenture ("MTI") structure. The MTI provides the flexibility for multiple parties to participate in debt issuances as part of an obligated group; presently, VUMC has no other third-party members participating in the obligated group. All debt issued under the MTI is a general obligation of the obligated group. Under the provisions of the Leasehold Deed of Trust, Security Agreement, Assignment of Rents and Leases, and Fixture Filing (the "Security Agreement") within the MTI, gross receivables of the obligated group are pledged as collateral. Additionally, the Security Agreement established a mortgage lien on (i) the leasehold interest of the land subject to the Ground Lease; (ii) the buildings, structures, improvements, and fixtures now or hereafter located on the land subject to the Ground Lease; and (iii) certain other collateral.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

Trust indentures for certain bond issues contain covenants and restrictions, the most material of which include limitations on the issuance of additional debt, maintenance of a specified debt service coverage ratio, and a minimum amount of days cash on hand. VUMC complied with such covenants and restrictions as of June 30, 2025 and 2024.

On April 29, 2016, VUMC delivered a secured subordinated promissory note in the amount of \$100 million to VU to finance the Acquisition (the "subordinated note"). In July of 2018, VU sold its rights to future principal and interest payments on this note to a third party. The note was issued at a fixed rate of 3.25% with monthly principal payments totaling \$5 million annually commencing on May 31, 2016, for a period of 20 years ending on April 30, 2036. VUMC may, at any time and from time to time, without premium or penalty, prepay all or any portion of the unpaid principal amount of the subordinated note. This note is secured by the gross receivables and mortgaged property described in the Security Agreement subject to the requirements of the 2016 Series Debt and the MTI.

As part of the Acquisition, VUMC assumed a 10-year, unsecured, noninterest-bearing product financing arrangement with a vendor for the purchase and implementation of internal use software. The annual payment of \$5.3 million is payable in monthly installments, is considered principal and imputed interest, and continues through Fiscal 2027. The balance due under the Product Financing Arrangement is \$6.8 million and \$11.7 million as of June 30, 2025 and 2024, respectively. At June 30, 2025 and 2024, \$5.1 million and \$4.9 million, respectively, was included in the current portion of long-term debt caption, with the remaining balance in long-term debt, net of current portion.

In Fiscal 2025 and 2024, noncash investing and financing activities totaled \$8.5 million and \$1.3 million, respectively, related to finance leases.

VUMC has an agreement with a bank to provide a general use line of credit with a maximum available commitment totaling \$100 million, which bears interest at a fixed spread to SOFR of 0.50%, accrues a commitment fee of 0.10% on any unused portion of the line of credit, and has a maturity date of March 31, 2026.

VUMC has an agreement with a bank to provide a general use line of credit with a maximum available commitment totaling \$100 million, which bears interest at a fixed spread to SOFR of 0.62%, accrues a commitment fee of 0.15% on any unused portion of the line of credit, and has a maturity date of May 1, 2026.

During Fiscal 2025, VUMC entered into a \$250 million syndicate credit agreement, which bears interest at a fixed spread to SOFR of 0.60%, accrues an unused commitment fee of 0.11% on any unused portion, and has a maturity date of May 5, 2028. This agreement has a \$100 million accordion feature which allows VUMC to request additional capacity at current market rates. The agreement allows for letters of credit for up to \$10 million with a fronting fee of 0.12%. There is one outstanding letter of credit totaling \$0.3 million as of June 30, 2025.

There are no outstanding balances on lines of credit as of June 30, 2025 or 2024. Commitment fees for the lines of credit totaled \$0.5 million and \$0.4 million in Fiscal 2025 and Fiscal 2024, respectively.

Interest paid on all obligations, including interest rate swap settlements, net of amounts capitalized, was \$60.4 million and \$67.3 million in Fiscal 2025 and 2024, respectively.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

Principal retirements and scheduled sinking fund requirements based on maturity schedules for long-term debt due in subsequent fiscal years ending June 30 are as follows:

(\$ in thousands)

2026	\$ 19,428
2027	313,368
2028	18,210
2029	101,490
2030	240,628
Thereafter	1,725,888
	<u>\$ 2,419,012</u>

12. Interest Rate Exchange Agreements

Key features of VUMC interest rate exchange agreements are summarized below:

<u>Notional Amount</u>	<u>Pay Fixed Rate</u>	<u>Receive Variable Rate</u>	<u>Mandatory Termination Date</u>
\$75.0 million	4.24%	68% of one-month LIBOR	May 2, 2025
\$75.0 million	4.28%	68% of one-month LIBOR	April 29, 2026

VUMC has historically used interest rate exchange agreements as part of its debt portfolio management strategy. In Fiscal 2024, VUMC terminated the two existing interest rate exchange agreements and paid a cash settlement of \$18.2 million.

During Fiscal 2024, excluding the final settlement, VUMC recorded the following activity related to the interest rate exchange agreements, which is presented as a gain on interest rate exchange agreements in the consolidated statement of operations:

<u>(\$ in thousands)</u>	<u>2024</u>
Mark-to-market adjustments	\$ 15,561
Periodic cash settlements	(654)
Gain on interest rate exchange agreements	<u>\$ 14,907</u>

13. Leases

VUMC has operating and finance leases for real estate, personal property, and equipment. VUMC determines if an arrangement is a lease at the inception of a contract. Leases with an initial term of twelve months or less are not recorded in the consolidated balance sheets.

VUMC has lease agreements which require payments for lease and non-lease components and has elected to account for these as a single lease component. For leases that commenced before the effective date of ASU 2016-02, VUMC elected the permitted practical expedients to not reassess the following: (i) whether any expired or existing contracts contain leases; (ii) the lease classification for any expired or existing leases; and (iii) initial direct costs for any existing leases.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

Right-of-use assets represent VUMC's right to use an underlying asset during the lease term, and lease liabilities represent VUMC's obligation to make lease payments arising from the lease. Right-of-use assets and liabilities are recognized at the commencement date, based on the net present value of fixed lease payments over the lease term. VUMC's lease terms include options to extend or terminate the lease when it is reasonably certain that the options will be exercised. As most of VUMC's operating leases do not provide an implicit rate, VUMC uses its incremental borrowing rate based on the information available at the commencement date in determining the present value of lease payments. VUMC considers recent debt issuances, as well as publicly available data for instruments with similar characteristics when calculating its incremental borrowing rates. Operating fixed lease expense and finance lease depreciation expense are recognized on a straight-line basis over the lease term. Variable lease costs consist primarily of common area maintenance and other index adjustments.

Operating and finance lease right-of-use assets and lease liabilities as of June 30, 2025 and 2024, are as follows:

(\$ in thousands)	Balance Sheet Classification	2025	2024
Assets:			
Operating leases	Operating leases	\$ 977,305	\$ 947,709
Finance leases	Property, plant, and equipment, net	13,067	10,580
Total lease assets		<u>\$ 990,372</u>	<u>\$ 958,289</u>
Liabilities:			
Current:			
Operating leases	Current portion of operating lease liabilities	\$ 82,480	\$ 73,420
Finance leases	Current portion of long-term debt	3,446	4,472
Noncurrent:			
Operating leases	Noncurrent portion of operating lease liabilities	931,210	901,155
Finance leases	Long-term debt, net of current portion	9,135	5,586
Total lease liabilities		<u>\$ 1,026,271</u>	<u>\$ 984,633</u>
Weighted-average remaining term:			
Operating leases		49.7 years	52.2 years
Finance leases		4.4 years	3.2 years
Weighted-average discount rate:			
Operating leases		4.1%	4.0%
Finance leases		4.8%	3.9%

Included in the tables above is the Ground Lease with VU expiring in 2114 discussed below. Excluding this lease, the weighted average remaining lease term for VUMC's operating leases is 12.8 years as of June 30, 2025, and 13.8 years as of June 30, 2024. As of June 30, 2025 and 2024, the land lease comprises \$486.9 million and \$487.5 million, respectively, of the operating lease asset and \$489.6 million and \$490.2 million, respectively, of the operating lease liability detailed above.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

Lease expense for finance and operating leases for the years ended June 30, 2025 and 2024, are as follows:

<i>(\$ in thousands)</i>	2025	2024
Finance lease expense:		
Amortization of leased assets	\$ 5,582	\$ 9,675
Interest on lease liabilities	445	474
Operating lease expense ⁽¹⁾	122,471	113,333
Short-term lease expense ⁽¹⁾	4,494	3,225
Variable lease expense ⁽¹⁾	18,416	16,640
	<u>\$ 151,408</u>	<u>\$ 143,347</u>

⁽¹⁾ Expense is included in "Facilities, equipment, and technology" in the consolidated statements of operations.

The following table presents supplemental cash flow information for the years ended June 30, 2025 and 2024:

<i>(\$ in thousands)</i>	2025	2024
Cash paid for amounts included in the measurement of lease liabilities:		
Operating cash flows for operating leases	\$ 110,744	\$ 105,766
Operating cash flows for finance leases	\$ 445	\$ 474
Financing cash flows for finance leases	\$ 6,000	\$ 9,726

The following table reconciles the undiscounted minimum lease payments to the operating and financing lease liabilities recorded in the consolidated balance sheet at June 30, 2025:

<i>(\$ in thousands)</i>	Operating Leases	Finance Leases
2026	\$ 115,114	\$ 3,891
2027	102,461	3,551
2028	90,810	2,103
2029	77,873	1,910
2030	72,726	1,441
Thereafter	2,011,538	1,194
Total minimum lease payments	2,470,522	14,090
Less: amount of lease payments representing interest	(1,456,832)	(1,509)
Present value of future minimum lease payments	1,013,690	12,581
Less: current lease obligations	(82,480)	(3,446)
Long-term lease obligations	<u>\$ 931,210</u>	<u>\$ 9,135</u>

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

Essential provisions of leases considered by management to be material are as follows:

- On April 29, 2016, VUMC entered into a Ground Lease with VU for approximately 1.7 million square feet of land for an initial term ending June 30, 2114, and an option to extend for up to two additional terms of 50 to 99 years each upon agreement by VU and VUMC. The annual base rent is payable monthly, and is CPI adjusted annually. VUMC made rental payments totaling \$24.1 million and \$23.3 million in Fiscal 2025 and 2024, respectively. The Ground Lease allows VUMC to use the land on which its campus and related buildings are located. Included in the table above are \$1.7 billion in ground lease payments representing future minimum rentals based on the initial annual base rent of \$19.4 million, excluding annual CPI adjustments.
- In July 2007, VU entered into an agreement to lease approximately 50% of the space in the 850,000 square foot One Hundred Oaks shopping center located approximately five miles from the main campus ("100 Oaks Lease"). VU redeveloped this leased space primarily for medical and office uses. In October 2014, VU agreed to an amendment which extends the original lease term to November 30, 2035, with an option to renew the lease further for four additional 10-year periods. As part of the lease agreement, the lessee also has first rights on leasing additional space in the shopping center and first rights on purchasing if the landlord desires to sell. On April 29, 2016, the 100 Oaks Lease was assigned to VUMC. On June 10, 2023, the lease was amended to add an additional 84,750 square feet of leased space within the facility. VUMC included minimum property rental payments totaling \$99.2 million related to this space in the above minimum lease payments table.
- On April 29, 2016, VU assigned to VUMC a lease for approximately 231,000 square feet of office space at 2525 West End Avenue with expiration dates ranging from 2026 through 2030, with options to renew for two additional five-year periods. VUMC included minimum lease payments totaling \$50.3 million related to this space in the above minimum lease payments table.
- On April 29, 2016, VUMC and VU entered into certain lease agreements for the use of space in buildings separately owned by each entity. As of June 30, 2025, VUMC's estimated future minimum lease payments to VU totaled \$13.2 million. Estimated future lease receipts from VU for the fiscal year ended June 30, 2026 are \$8.9 million, subject to annual renewal.
- On November 1, 2022, VUMC entered into a lease agreement for office space at 431 Great Circle Road, located approximately five miles from the main campus. The lease provided for initial occupancy of approximately 94,000 square feet, with occupancy of an additional 16,000 square feet of space commencing on February 16, 2023, for a total of 110,000 square feet. The lease expiration date is October 31, 2042. VUMC included minimum lease payments totaling \$44.1 million related to this space in the above minimum lease payments table.
- On June 1, 2024, VUMC entered into a lease agreement for a building at 402 Franklin Road approximately 12 miles from the main campus. VUMC intends to redevelop this leased space for medical and office uses. The lease provided for initial occupancy of approximately 347,515 square feet. The lease expiration date is May 31, 2054. VUMC included minimum lease payments totaling \$282.5 million related to this space in the above minimum lease payments table.

Vanderbilt University Medical Center
Notes to Consolidated Financial Statements
June 30, 2025 and 2024

14. Net Assets

Net asset restrictions relate to the following purposes as of June 30, 2025 and 2024:

(\$ in thousands)	2025	2024
Donor-restricted – time or purpose		
Property, plant, and equipment	\$ 30,639	\$ 26,800
Research and education	186,618	166,945
Operations	22,654	20,577
Total donor-restricted – time or purpose	\$ 239,911	\$ 214,322
Donor restricted – perpetuity		
Research and education	\$ 179,004	\$ 130,092

Net assets without donor restrictions are free of donor-imposed restrictions. This classification includes all revenues, gains, and losses not restricted by donors. VUMC reports all expenditures in net assets without donor restrictions since the use of restricted contributions in accordance with donors' stipulations results in the release of the restriction.

Donor restricted – time or purpose contain donor-imposed stipulations that expire with the passage of time or that can be satisfied by the action of VUMC. These net assets may include restricted gifts including unconditional pledges, split-interest agreements, interests in trusts held by others, and accumulated appreciation on donor-restricted endowments not yet appropriated by the Board of Directors for distribution. Donor gifts that are restricted for funding capital projects are considered released from restriction once related capital expenditures have been made and the asset is placed in service.

Donor restricted – perpetuity contains amounts held in perpetuity as requested by donors. These net assets may include unconditional pledges, donor-restricted endowments, split-interest agreements, and interests in trusts held by others. Generally, the donors of these assets permit VUMC to use a portion of the income earned on related investments for specific purposes.

UPMIFA specifies that unless stated otherwise in a gift instrument, donor-restricted assets in an endowment fund are restricted assets until appropriated for expenditure. Barring the existence of specific instructions in gift agreements for donor-restricted endowments, VUMC reports the historical value of such endowments as donor restricted – perpetuity and the net accumulated appreciation as donor restricted – time or purpose. In this context, the historical value represents the original value of initial contributions restricted as permanent endowments plus the original value of subsequent contributions and, if applicable, the value of accumulations made in accordance with the direction of specific donor gift agreements.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

15. Fair Value Measurements

Fair value measurements represent the amount at which the instrument could be exchanged in an orderly transaction between market participants at the measurement date. VUMC utilizes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value into three levels:

- Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that VUMC has the ability to access.
- Level 2 Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets, quoted prices for identical or similar assets or liabilities in inactive markets, inputs other than quoted prices that are observable for the assets or liabilities, and inputs that are derived principally from or corroborated by observable market data by correlation or other means.
- Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement. Unobservable inputs reflect VUMC's assumptions about the inputs market participants would use in pricing the asset or liability, including assumptions about risk. Unobservable inputs are developed based on the best information available in the circumstances and may include VUMC's own data.

For financial instruments measured at fair value on a recurring basis, the following tables summarize valuation hierarchy levels as of June 30, 2025 and 2024, determined by the nature of the financial instrument and the least observable input significant to the fair value measurement:

Fair Value Measurements as of June 30, 2025				
(\$ in thousands)	Level 1	Level 2	Level 3	Total Carrying Amount
Corporate bonds	\$ —	\$ 522,064	\$ —	\$ 522,064
Equity mutual funds	71,055	122,087	—	193,142
Cash and cash equivalents	334,271	—	—	334,271
Beneficial interests in split-interest trusts	—	10,319	—	10,319
Hedged equity mutual funds	—	20,354	—	20,354
Fixed-income mutual funds	40,047	138,810	—	178,857
Mortgage-backed securities	—	177,756	—	177,756
Government bonds	—	131,733	—	131,733
Hedged debt mutual funds	—	46,189	—	46,189
Commodities and managed futures mutual funds	5,400	10,552	—	15,952
Target date mutual funds	—	10,439	—	10,439
Equity securities	174,910	—	—	174,910
Total assets in the fair value hierarchy	\$ 625,683	\$ 1,190,303	\$ —	\$ 1,815,986
Investments measured at net asset value				214,330
Total assets reported at fair value				\$ 2,030,316

Vanderbilt University Medical Center
Notes to Consolidated Financial Statements
June 30, 2025 and 2024

Fair Value Measurements as of June 30, 2024				
<i>(\$ in thousands)</i>	Level 1	Level 2	Level 3	Total Carrying Amount
Corporate bonds	\$ —	\$ 411,001	\$ —	\$ 411,001
Equity mutual funds	46,813	126,321	—	173,134
Cash and cash equivalents	71,569	—	—	71,569
Beneficial interests in split-interest trusts	—	9,482	—	9,482
Hedged equity mutual funds	—	34,112	—	34,112
Fixed-income mutual funds	29,395	137,070	—	166,465
Mortgage-backed securities	—	129,645	—	129,645
Government bonds	—	100,610	—	100,610
Hedged debt mutual funds	—	61,750	—	61,750
Commodities and managed futures mutual funds	3,804	11,961	—	15,765
Target date mutual funds	—	12,807	—	12,807
Equity securities	135,671	—	—	135,671
Total assets in the fair value hierarchy	<u>\$ 287,252</u>	<u>\$ 1,034,759</u>	<u>\$ —</u>	<u>\$ 1,322,011</u>
Investments measured at net asset value				<u>155,949</u>
Total assets reported at fair value				<u>\$ 1,477,960</u>

Certain of the investments are reported using a calculated NAV per share. These investments are not expected to be sold at amounts that are materially different from NAV. The following tables identify attributes relating to the nature and risk of investments for which fair value is determined using a calculated NAV as of June 30, 2025 and 2024:

June 30, 2025				
<i>(\$ in thousands)</i>	Carrying Amount	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Private credit ⁽¹⁾	\$ 18,549	\$ 1,726	None	None
Private equity ⁽²⁾	67,113	29,148	None	None
Multi-strategy hedge funds ⁽³⁾	48,960	—	Quarterly	60-95 Days
Real estate mutual funds ⁽⁴⁾	40,836	—	Semi-annual	90 Days
Hedged equity funds ⁽⁵⁾	38,872	—	Monthly, Quarterly	30-90 Days
Total	<u>\$ 214,330</u>	<u>\$ 30,874</u>		

Vanderbilt University Medical Center
Notes to Consolidated Financial Statements
June 30, 2025 and 2024

(\$ in thousands)	June 30, 2024			
	Carrying Amount	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Private credit ⁽¹⁾	\$ 15,426	\$ 3,483	None	None
Private equity ⁽²⁾	56,454	18,465	None	None
Multi-strategy hedge funds ⁽³⁾	25,075	5,000	Quarterly	65-95 Days
Real estate mutual funds ⁽⁴⁾	37,512	–	Semi-annual	90 Days
Hedged equity fund ⁽⁵⁾	21,482	–	Quarterly	90 Days
Total	<u>\$ 155,949</u>	<u>\$ 26,948</u>		

(1) This class includes private credit funds that seek to generate current income and, to a lesser extent, capital appreciation by targeting investment opportunities with favorable risk-adjusted returns primarily by originating and making loans to, and making debt and equity investments in, U.S. middle-market companies. The fair values of the investments in this class have been estimated using the net asset value per share of the investments. Redemptions for investments representing approximately 85% of the value of investments in this class are limited to a 5% quarterly gate; however, they are not guaranteed.

(2) This class includes domestic and foreign private equity funds that specialize in providing capital to a variety of investment groups including, but not limited to, venture capital, leveraged buyout, mezzanine debt, distressed debt, and other strategies. The fair values of the investments in this class have been estimated using the net asset value per share of the investments. Redemptions for investments representing approximately 58% of the value of investments in this class are limited to a 5% quarterly gate; however, they are not guaranteed. The remaining investments have no provisions for redemptions during the life of these funds.

(3) This class invests in hedge funds that pursue multiple strategies and techniques within and across various asset classes (both domestic and foreign) in order to diversify risks and reduce volatility. The fair values of the investments in this class have been estimated using the net asset value per share of the investments. Approximately 37% of the value of investments in this class are redeemable over four years, with quarterly gates from 12.5% to 100%. Under certain circumstances, an otherwise redeemable investment or portion thereof could become restricted.

(4) This class includes domestic and foreign investments in real estate funds that invest in a broad range of infrastructure and infrastructure-related assets. The fair values of the investments in this class have been estimated using the net asset value per share of the investments. Redemptions for investments representing approximately 35% of the value of investments in this class are limited to a 5% quarterly gate; however, they are not guaranteed.

(5) This class includes investments in equity hedge funds that invest primarily in securities of public companies which may experience appreciation in value as a result of a change in ownership, corporate direction or management improved corporate governance, or as a result of operational improvements. The fair values of the investments in this class have been estimated using the net asset value per share of the investments.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

16. Retirement Plan

VUMC's full-time employees participate in a 403(b) defined contribution retirement plan administered by a third party. For eligible employees with one year of continuous service, this plan requires employer matching of employee contributions up to 5% of eligible compensation. The employee immediately vests in these contributions.

VUMC funds the obligations under this plan through monthly transfers to the respective retirement plan administrator with the corresponding expense recognized in the year incurred. During Fiscal 2025 and 2024, VUMC recognized \$119.1 million and \$106.9 million, respectively, of expense in connection with this plan.

17. Functional Expense

VUMC provides general health care services primarily to residents within its geographic location and supports research and education programs. Total operating expense by nature and function for Fiscal 2025 and 2024 were as follows:

(\$ in thousands)	For the Year Ended June 30, 2025			
	Healthcare Services	Academic Research and Education	Administrative and Other	Total
Salaries, wages, and benefits	\$ 3,188,245	\$ 798,246	\$ 404,301	\$ 4,390,792
Supplies and drugs	1,902,822	65,881	27,640	1,996,343
Facilities, equipment, and technology	247,670	88,864	128,423	464,957
Services and other	755,318	225,045	143,653	1,124,016
Depreciation and amortization	185,980	27,573	6,969	220,522
Interest	53,430	9,671	20	63,121
Total operating expense	<u>\$ 6,333,465</u>	<u>\$ 1,215,280</u>	<u>\$ 711,006</u>	<u>\$ 8,259,751</u>

(\$ in thousands)	For the Year Ended June 30, 2024			
	Healthcare Services	Academic Research and Education	Administrative and Other	Total
Salaries, wages, and benefits	\$ 2,869,129	\$ 731,588	\$ 358,851	\$ 3,959,568
Supplies and drugs	1,684,024	64,388	19,904	1,768,316
Facilities, equipment, and technology	229,043	86,297	117,071	432,411
Services and other	743,034	142,226	116,894	1,002,154
Depreciation and amortization	170,610	26,349	7,834	204,793
Interest	57,461	10,414	21	67,896
Total operating expense	<u>\$ 5,753,301</u>	<u>\$ 1,061,262</u>	<u>\$ 620,575</u>	<u>\$ 7,435,138</u>

Certain expense categories are attributable to more than one function. Therefore, these expenses require an allocation on a reasonable basis that is consistently applied. The expenses that are allocated include salaries, wages, and benefits, and services and other.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

18. Commitments and Contingencies

Management has policies, procedures, and an organizational structure, as well as a defined compliance program, to enforce and monitor compliance with government laws and regulations. VUMC's compliance with such laws and regulations is subject to government review and interpretation, as well as regulatory actions unknown at this time.

- **Litigation; Payor Disputes.** VUMC is a defendant in certain medical professional liability lawsuits and other civil actions, none of which are anticipated to have a material effect on VUMC's consolidated financial position. In addition, VUMC from time to time pursues claims and appeals of adverse payment decisions by third parties, including governmental and commercial payors. These include but are not limited to appeals relating to Medicare reimbursements matters before the Provider Reimbursement Review Board, payments for drugs purchased and dispensed through the 340B discounted drug purchasing program, and payments received under commercial payor reimbursement agreements. The outcome of any outstanding claims and appeals are not expected to have a material effect on VUMC's consolidated financial position.
- **Compliance Program.** Through the operation of its compliance program, VUMC, from time to time, initiates the review of billing for clinical services provided by VUMC and its affiliated providers. VUMC has established a liability reserve relating to certain matters under review as of June 30, 2025 and 2024, which is not material to VUMC's consolidated financial position.
- **Regulatory Reviews.** VUMC is subject to the regulation and oversight of various state and federal government agencies and from time to time receives subpoenas, requests for documents or other information, civil investigative demands or other legal process related to VUMC's business and operations (including its billing practices). VUMC's compliance with laws and regulations is subject to government reviews and interpretations, as well as regulatory actions unknown at this time, including the scope, interpretation, and enforceability of numerous policies, executive orders, and departmental guidelines issued by the current federal administration. VUMC believes that the liability, if any, from such reviews will not have a material effect on VUMC's consolidated financial position.
- **Self-Insurance Reserves.** The consolidated balance sheets include reserves for medical malpractice, other professional, and general liability coverage totaling \$95.7 million as of June 30, 2025, and \$83.2 million as of June 30, 2024. These liabilities are measured at the net present value of those cash flows using a discount rate of 4.0% as of June 30, 2025 and 2024, and are classified as current or noncurrent based on the expected timing of cash flows. Other current assets include expected recoveries from commercial insurance carriers under excess coverage arrangements totaling \$4.7 million as of June 30, 2025, and \$4.8 million as of June 30, 2024. During Fiscal 2025 and 2024, VUMC recorded expenses for medical malpractice, other professional, and general liability self-insurance of \$19.3 million and \$23.4 million, respectively.
- **Employee Health and Workers' Compensation Insurance.** Accrued compensation and benefits included actuarially determined liabilities for employee health and workers' compensation claims totaling \$36.3 million and \$7.3 million, respectively, as of June 30, 2025, and \$35.2 million and \$6.8 million, respectively, as of June 30, 2024. During Fiscal 2025 and 2024, VUMC recorded expenses for self-insured employee health benefit plans, net of employee premiums, totaling \$366.2 million and \$368.1 million, respectively. VUMC recorded expenses for self-insured workers' compensation plans of \$6.0 million and \$4.6 million during Fiscal 2025 and 2024, respectively.

Vanderbilt University Medical Center

Notes to Consolidated Financial Statements

June 30, 2025 and 2024

- **Federal and State Contracts and Other Requirements.** Expenditures related to federal and state grants and contracts are subject to adjustment based upon review by the granting agencies. Amounts of expenditures that granting agencies might disallow cannot be determined at this time. These amounts affect government grants and contracts revenue, as well as facilities and administrative costs recovery. VUMC does not expect these costs to impact the consolidated financial position by material amounts.
- **Health Care Services.** In Fiscal 2025 and 2024, 87% and 86% of VUMC's operating revenue was generated by providing health care services, respectively, where revenue is affected by reimbursement arrangements with federal and state healthcare programs, commercial insurance, and other managed care payors. If reimbursement rates from third-party payors decrease or if contract terms become less favorable in future periods, VUMC's operating revenues may decline. See Note 4 Patient Service Revenue, Patient Accounts Receivable, and Estimated Third-Party Settlements for further information regarding healthcare revenues and related receivables.
- **HIPAA Compliance.** Under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") and related regulations, the federal government has authority to investigate potential breaches of federal requirements for the privacy and security of patient health information to impose substantial fines and penalties in connection with violations. VUMC maintains policies, procedures, and organizational structures to enforce and monitor compliance with HIPAA, as well as other related federal and state laws, rules, and regulations.
- **Construction.** VUMC had contractual commitments under major construction and equipment contracts totaling \$144.8 million and \$425.7 million as of June 30, 2025 and 2024, respectively.

19. Subsequent Events

Management has evaluated subsequent events and disclosed all material events through September 30, 2025, the date the accompanying consolidated financial statements were issued.

Supplementary Information

VANDERBILT UNIVERSITY MEDICAL CENTER
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Fiscal Period 7/1/2024 - 6/30/2025

Federal Awarding Agency/Program Title	Assistance Listing Number	Additional Award Identification (Optional)	Name of Funder Pass-Through Entity	Identifying Number Assigned By Funder Pass-Through Entity	Total Amount Provided to Sub-Recipients	Federal Expenditures	Federal Program Total	Cluster Name	Cluster Total
DEPARTMENT OF AGRICULTURE									
AGRICULTURAL RESEARCH_BASIC AND APPLIED RESEARCH	10.001	59-0210-6-004				(\$1,211)	\$161	RESEARCH AND DEVELOPMENT	\$559,144,589
AGRICULTURAL RESEARCH_BASIC AND APPLIED RESEARCH	10.001	59-0210-8-184				(\$58)	\$161	RESEARCH AND DEVELOPMENT	\$559,144,589
AGRICULTURAL RESEARCH_BASIC AND APPLIED RESEARCH	10.001	VUMC85896(DAA9-20-66870-1)				\$1,430	\$161	RESEARCH AND DEVELOPMENT	\$559,144,589
1890 INSTITUTION CAPACITY BUILDING GRANTS	10.216	VUMC103567(2022-38821-37352)	Tennessee State University	2022-38821-27352		\$33,802	\$33,802	RESEARCH AND DEVELOPMENT	\$559,144,589
TOTAL DEPARTMENT OF AGRICULTURE						\$33,963			
DEPARTMENT OF COMMERCE									
2023 MBDA CAPITAL READINESS PROGRAM	11.034	VUMC129707(MB23OBD0340328-T1-01)	University of Arkansas for Medical Sciences	VUMC129707(MB23OBD0340328-T1-01)		\$20,776	\$20,776	N/A	\$0
WEATHER AND AIR QUALITY RESEARCH	11.459	VUMC127082(NA23OAR4590360-T1-01)	Jacksonville State University	VUMC127082(NA23OAR4590360-T1-01)		\$59,311	\$59,311	RESEARCH AND DEVELOPMENT	\$559,144,589
TOTAL DEPARTMENT OF COMMERCE						\$80,087			
DEPARTMENT OF DEFENSE									
BASIC AND APPLIED SCIENTIFIC RESEARCH	12.300	N00014-22-1-2184			\$21,417	\$254,454	\$254,882	RESEARCH AND DEVELOPMENT	\$559,144,589
BASIC AND APPLIED SCIENTIFIC RESEARCH	12.300	VUMC114293(C#10142-MEASURE)	National Marrow Donor Program (BeTheMatch Foundation)	VUMC114293(C#10142-MEASURE)		\$428	\$254,882	RESEARCH AND DEVELOPMENT	\$559,144,589
SCIENTIFIC RESEARCH - COMBATING WEAPONS OF MASS DESTRUCTION	12.351	VUMC88438(0000058521)	Emory University	VUMC88438(0000058521)		\$168,122	\$168,122	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425210307				\$71,181	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425-23-1-0003			\$18,852	\$30,826	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT942523-1-0004				\$84,715	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425-23-1-0044				\$208,415	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425-23-1-0070				\$113,991	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425-23-1-0300				\$541,855	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT94252310342			\$86,515	\$187,021	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425-23-1-0410				\$408,979	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425-23-1-0460				\$696,235	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425-23-1-0668				\$229,905	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT94252310776				\$214,263	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT942523-1-0778				\$283,938	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425-23-1-0864			\$14,963	\$540,649	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425-23-1-0911				\$230,235	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425-23-1-0921				\$224,745	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425-24-1-0035			\$13,143	\$301,172	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT94252410074				\$562,453	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425-24-1-0248			\$11,103	\$126,164	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425-24-1-0382				\$202,729	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425-24-1-0383				\$285,026	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425-24-1-0563				\$248,030	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420					\$153,113	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425-24-1-0866				\$249,191	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT94252411089				\$56,165	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT94252420008				\$204,873	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	HT9425-25-1-0308				\$14,216	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC103522(W81XWH2210308)	Vanderbilt University	VUMC103522(W81XWH2210308)		\$929	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC104827(W81XWH2210475)	Baylor College of Medicine	VUMC104827(W81XWH2210475)		\$8,405	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC107032(W81XWH2211106)	Northwestern University	VUMC107032(W81XWH2211106)		(\$27,196)	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC107987(W81XWH22-1-0201)	University of Iowa	VUMC107987(W81XWH22-1-0201)	\$81,833	\$102,015	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC108122(W81XWH2210301)	Boston Childrens Hospital	VUMC108122(W81XWH2210301)		\$8,189	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC108554(W81XWH2211123)	Liberate Medical	VUMC108554(W81XWH2211123)		\$358,484	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC109197(W81XWH2210304)	Carnegie Mellon	VUMC109197(W81XWH2210304)		\$238,872	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC109328(Master VUMC109750 W911NF2120078)	Civil-military Innovation Institute, Inc	VUMC109328(Master VUMC109750 W911NF2120078)	\$199,930	\$688,588	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC109452(W81XWH-22-90015)	Prlytime Medical Devices, Inc.	VUMC109452(W81XWH-22-90015)	\$52,587	\$180,957	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC109716(W81XWH2210661)	Vanderbilt University	VUMC109716(W81XWH2210661)		\$27,394	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC110627	Civil-military Innovation Institute, Inc	VUMC110627		\$8,657	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC111654(W81XWH2210890)	MD Anderson Cancer Center	VUMC111654(W81XWH2210890)		\$47,219	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC112999(W81XWH2020055)	University of Pittsburgh	VUMC112999(W81XWH2020055)		\$29,003	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC113933(W81XWH1810564)	Academic and Community Cancer Research United	VUMC113933(W81XWH1810564)		\$57,209	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC116684(HT94252310267)	Dartmouth College	VUMC116684(HT94252310267)	\$11,782	\$11,782	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC117404(W81XWH-15-9-001)	Geneva Foundation	VUMC117404(W81XWH-15-9-001)		\$183,000	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC117479(75D30121D12778)	Washington University	VUMC117479(75D30121D12778)		\$341,445	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC117628(HT9425-23-1-0705)	University of Pennsylvania	VUMC117628(HT9425-23-1-0705)		\$79,766	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC118732(HT94252310965)	Beth Israel Deaconess Medical Center (Harvard)	VUMC118732(HT94252310965)		\$15,105	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC123719(HT94252310413)	Massachusetts General Hospital	VUMC123719(HT94252310413)		\$52,600	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC123720(W81XWH2110833)	Massachusetts General Hospital	VUMC123720(W81XWH2110833)		\$386,746	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC126589	Johns Hopkins	VUMC126589		\$24,597	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC130409(W81XWH159001)	University of California-San Francisco	VUMC130409(W81XWH159001)		\$20,727	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC133905(W81XWH2211106)	Northwestern University	VUMC133905(W81XWH2211106)		\$184,372	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC62614(W81XWH-16-2-0060)	Johns Hopkins University School of Medicine	VUMC62614(W81XWH-16-2-0060)		(\$21,961)	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC70051(W81XWH1810790)	University of Rochester	VUMC70051(W81XWH1810790)		(\$3,817)	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC74579(W81XWH-16-D-0024)(W81XWH18F0426)	University of Pittsburgh	VUMC74579(W81XWH-16-D-0024)(W81XWH18F0426)		\$70,442	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC78235(W81XWH1910405)	IDBiologics, LLC	VUMC78235(W81XWH1910405)		\$2,172	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC82342(W81XWH-17-1-0631)	University of California-San Francisco	VUMC82342(W81XWH-17-1-0631)		(\$667)	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC86328(W81XWH-20-2-0032)	Coalition for National Trauma Research	VUMC86328(W81XWH-20-2-0032)		(\$24,656)	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC86362(W81XWH2010692)	Northwestern University	VUMC86362(W81XWH2010692)		(\$962)	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC91669(W81XWH2020050)	Johns Hopkins University School of Medicine	VUMC91669(W81XWH2020050)		\$19,246	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC93452(W81XWH2020063)	Johns Hopkins University School of Medicine	VUMC93452(W81XWH2020063)		\$25,341	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC95835(W81XWH-16-D-0024, W81XWH20F0383)	University of Pittsburgh	VUMC95835(W81XWH-16-D-0024, W81XWH20F0383)		\$180,804	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC96557(W81XWH-21-1-0273)	University of Kentucky	VUMC96557(W81XWH-21-1-0273)		\$106,877	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC96620(W81XWH2110591)	Carnegie Mellon	VUMC96620(W81XWH2110591)		\$728	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC96816(W81XWH1910848)	University of Maryland Baltimore	VUMC96816(W81XWH1910848)		\$7,155	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC97071(W81XWH21-1-0833)	University of Kentucky Research Foundation	VUMC97071(W81XWH21-1-0833)		\$47	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	VUMC98029(W81XWH2120053)	The Metis Foundation	VUMC98029(W81XWH2120053)		\$17,030	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-18-1-0149(BC170037)				(\$343)	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-18-1-0810			\$132,348	\$456,729	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-19-1-0812				\$0	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589

VANDERBILT UNIVERSITY MEDICAL CENTER
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Fiscal Period 7/1/2024 - 6/30/2025

Federal Awarding Agency/Program Title	Assistance Listing Number	Additional Award Identification (Optional)	Name of Funder Pass-Through Entity	Identifying Number Assigned By Funder Pass-Through Entity	Total Amount Provided to Sub-Recipients	Federal Expenditures	Federal Program Total	Cluster Name	Cluster Total
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-20-1-0648				\$0	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-20-1-0701			\$147,221	\$196,184	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-20-2-0046			\$141,207	\$443,336	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-21-1-0051				(\$10,072)	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-21-1-0441				\$258,067	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-21-1-0617 (NCE)				\$595,915	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-21-1-0694			\$2,966	\$126,890	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-21-1-0765			\$8,813	\$472,021	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-21-1-0786				\$220,662	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-21-2-0025				\$90,839	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-22-1-0090				\$278,031	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-22-1-0109				\$217,584	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-22-1-0418(KC210152)				\$169,129	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-22-1-0419				\$23,691	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-22-1-0484				\$394,568	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH22-1-0635			\$425,225	\$592,666	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-22-1-1008				\$329,216	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH-22-1-1033			\$174,715	\$963,436	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W81XWH22-1-1087			\$28,606	\$371,175	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
MILITARY MEDICAL RESEARCH AND DEVELOPMENT	12.420	W911QY2310001				\$29,339	\$16,075,792	RESEARCH AND DEVELOPMENT	\$559,144,589
UNIFORMED SERVICES UNIVERSITY MEDICAL RESEARCH PROJECTS	12.750	VUMC130350(HU0001230076)	Henry M. Jackson Foundation for the Advancement of Military Medicine	VUMC130350(HU0001230076)		\$74,185		RESEARCH AND DEVELOPMENT	\$559,144,589
RESEARCH AND TECHNOLOGY DEVELOPMENT	12.910	HR0011-18-2-0001			\$3,286,506	\$3,477,328	\$4,155,641	RESEARCH AND DEVELOPMENT	\$559,144,589
RESEARCH AND TECHNOLOGY DEVELOPMENT	12.910	VUMC128871(N660012424024)	Johns Hopkins	VUMC128871(N660012424024)		\$678,313	\$4,155,641	RESEARCH AND DEVELOPMENT	\$559,144,589
DEPARTMENT OF DEFENSE	12.RD	VUMC114422(W911SR2380017)			\$306,605	\$3,726,894	\$4,686,842	RESEARCH AND DEVELOPMENT	\$559,144,589
DEPARTMENT OF DEFENSE	12.RD	VUMC112752(W15QKN-16-9-1002)	IDBiologics, LLC	VUMC112752(W15QKN-16-9-1002)		\$203,579	\$4,686,842	RESEARCH AND DEVELOPMENT	\$559,144,589
DEPARTMENT OF DEFENSE	12.RD	VUMC120539(MTEC-19-08-MuLTI-0043)	University of Colorado Denver	VUMC120539(MTEC-19-08-MuLTI-0043)		\$100,355	\$4,686,842	RESEARCH AND DEVELOPMENT	\$559,144,589
DEPARTMENT OF DEFENSE	12.RD	VUMC121405	University of Colorado Denver	VUMC121405		\$147,634	\$4,686,842	RESEARCH AND DEVELOPMENT	\$559,144,589
DEPARTMENT OF DEFENSE	12.RD	VUMC122982(W911QX23C0011)(Master VUMC121676)	Civil-military Innovation Institute, Inc	VUMC122982(W911QX23C0011)(Master VUMC121676)	\$149,906	\$417,678	\$4,686,842	RESEARCH AND DEVELOPMENT	\$559,144,589
DEPARTMENT OF DEFENSE	12.RD	VUMC99217(47QFWA20C0012)	University of Colorado Denver	VUMC99217(47QFWA20C0012)		\$90,702	\$4,686,842	RESEARCH AND DEVELOPMENT	\$559,144,589
TOTAL DEPARTMENT OF DEFENSE					\$5,383,338	\$25,415,464			
DEPARTMENT OF JUSTICE									
SEXUAL ASSAULT FORENSIC EXAMINATIONS	16.053	15POVC-23-GK-01410-SAFE			\$29,024	\$118,696	\$118,696	N/A	\$0
COMPREHENSIVE OPIOID, STIMULANT, AND OTHER SUBSTANCES USE PROGRAM	16.838	VUMC81153 (Edison ID 72816)	State of Tennessee	VUMC81153 (Edison ID 72816)		\$1,724	\$3,315	N/A	\$0
COMPREHENSIVE OPIOID, STIMULANT, AND OTHER SUBSTANCES USE PROGRAM	16.838	VUMC96501(Edison ID: 72930)	State of Tennessee	VUMC96501(Edison ID: 72930)		\$1,591	\$3,315	N/A	\$0
TOTAL DEPARTMENT OF JUSTICE					\$29,024	\$122,011			
DEPARTMENT OF THE TREASURY									
CORONAVIRUS STATE AND LOCAL FISCAL RECOVERY FUNDS	21.027	VUMC118004(SLFRP5534)	Tennessee Department of Health Services	VUMC118004(SLFRP5534)		\$1,176,628	\$1,518,581	N/A	\$0
CORONAVIRUS STATE AND LOCAL FISCAL RECOVERY FUNDS	21.027	VUMC117927(133) (Edison ID 0000006442)				\$341,953	\$1,518,581	N/A	\$0
TOTAL DEPARTMENT OF THE TREASURY						\$1,518,581			
NATIONAL AERONAUTICS & SPACE ADMINISTRATION									
NATIONAL AERONAUTICS & SPACE ADMINISTRATION	43.003	VUMC76580(80NSSC19M0161)	National Council on Radiation Protection and Measurements	VUMC76580(80NSSC19M0161)		\$246,092	\$246,092	RESEARCH AND DEVELOPMENT	\$559,144,589
OFFICE OF STEM ENGAGEMENT (OSTEM)	43.008	VUMC116430(80NSSC23M0129)	National Council on Radiation Protection and Measurements	VUMC116430(80NSSC23M0129)		\$520,598	\$250,598	RESEARCH AND DEVELOPMENT	\$559,144,589
TOTAL NATIONAL AERONAUTICS & SPACE ADMINISTRATION						\$766,690			
NATIONAL ENDOWMENT FOR THE HUMANITIES									
PROMOTION OF THE ARTS, GRANTS TO ORGANIZATIONS AND INDIVIDUALS	45.024	1906827-38-22				\$70,683	\$77,571	RESEARCH AND DEVELOPMENT	\$559,144,589
PROMOTION OF THE ARTS, GRANTS TO ORGANIZATIONS AND INDIVIDUALS	45.024	1936572-38-24				\$6,888	\$77,571	RESEARCH AND DEVELOPMENT	\$559,144,589
TOTAL NATIONAL ENDOWMENT FOR THE HUMANITIES						\$77,571			
NATIONAL SCIENCE FOUNDATION									
ENGINEERING	47.041	2050252				\$535	\$96,499	RESEARCH AND DEVELOPMENT	\$559,144,589
ENGINEERING	47.041	VUMC98271(2124002)	Vanderbilt University	VUMC98271(2124002)		\$95,964	\$96,499	RESEARCH AND DEVELOPMENT	\$559,144,589
COMPUTER AND INFORMATION SCIENCE AND ENGINEERING	47.070	2050895				\$2,445	\$179,029	RESEARCH AND DEVELOPMENT	\$559,144,589
COMPUTER AND INFORMATION SCIENCE AND ENGINEERING	47.070	2348793				\$176,584	\$179,029	RESEARCH AND DEVELOPMENT	\$559,144,589
BIOLOGICAL SCIENCES	47.074	2147467				\$188,157	\$432,988	RESEARCH AND DEVELOPMENT	\$559,144,589
BIOLOGICAL SCIENCES	47.074	NSF-2011291				\$1,286	\$432,988	RESEARCH AND DEVELOPMENT	\$559,144,589
BIOLOGICAL SCIENCES	47.074	VUMC125522 (CBET2328276)	Vanderbilt University	VUMC125522 (CBET2328276)		\$7,491	\$432,988	RESEARCH AND DEVELOPMENT	\$559,144,589
BIOLOGICAL SCIENCES	47.074	VUMC75495(1845634)	University of Massachusetts Boston	VUMC75495(1845634)		\$1,867	\$432,988	RESEARCH AND DEVELOPMENT	\$559,144,589
BIOLOGICAL SCIENCES	47.074	VUMC94916(2120084)	University of Pittsburgh	VUMC94916(2120084)		\$234,187	\$432,988	RESEARCH AND DEVELOPMENT	\$559,144,589
SOCIAL, BEHAVIORAL, AND ECONOMIC SCIENCES	47.075	2414934			\$35,275	\$52,377	\$52,377	RESEARCH AND DEVELOPMENT	\$559,144,589
STEM EDUCATION	47.076	DUE1926794			-\$126	\$2,270	\$98,342	RESEARCH AND DEVELOPMENT	\$559,144,589
STEM EDUCATION	47.076	VUMC96425(2116026)	Oregon State University	VUMC96425(2116026)		\$96,072	\$98,342	RESEARCH AND DEVELOPMENT	\$559,144,589
OFFICE OF INTERNATIONAL SCIENCE AND ENGINEERING	47.079	202312-71500 (OISE-9531011)				\$51,013	\$194,341	RESEARCH AND DEVELOPMENT	\$559,144,589
OFFICE OF INTERNATIONAL SCIENCE AND ENGINEERING	47.079	202403-71942 OISE-9531011	CRDF Global (Civilian Research and Development Foundation)	202403-71942 OISE-9531011		\$27,664	\$194,341	RESEARCH AND DEVELOPMENT	\$559,144,589
OFFICE OF INTERNATIONAL SCIENCE AND ENGINEERING	47.079	202410-72982(OISE-9531011)	CRDF Global (Civilian Research and Development Foundation)	202410-72982(OISE-9531011)		\$2,210	\$194,341	RESEARCH AND DEVELOPMENT	\$559,144,589
OFFICE OF INTERNATIONAL SCIENCE AND ENGINEERING	47.079	202502-73482 (prime OISE-9531011)	CRDF Global (Civilian Research and Development Foundation)	202502-73482 (prime OISE-9531011)		\$18,812	\$194,341	RESEARCH AND DEVELOPMENT	\$559,144,589
OFFICE OF INTERNATIONAL SCIENCE AND ENGINEERING	47.079	G-202105-67817				\$5,101	\$194,341	RESEARCH AND DEVELOPMENT	\$559,144,589
OFFICE OF INTERNATIONAL SCIENCE AND ENGINEERING	47.079	G-202105-67822-01				\$12,493	\$194,341	RESEARCH AND DEVELOPMENT	\$559,144,589
OFFICE OF INTERNATIONAL SCIENCE AND ENGINEERING	47.079	G-202403-71803				\$73,729	\$194,341	RESEARCH AND DEVELOPMENT	\$559,144,589
OFFICE OF INTERNATIONAL SCIENCE AND ENGINEERING	47.079	VUMC133447(OISE-9531011)				\$3,319	\$194,341	RESEARCH AND DEVELOPMENT	\$559,144,589
NSF TECHNOLOGY, INNOVATION, AND PARTNERSHIPS	47.084	2451172				\$13,661	\$13,661	RESEARCH AND DEVELOPMENT	\$559,144,589
TOTAL NATIONAL SCIENCE FOUNDATION					\$35,149	\$1,067,237			
DEPARTMENT OF EDUCATION									
SPECIAL EDUCATION, GRANTS TO STATES	84.027	000	Tennessee Department of Disability and Aging	000		\$6,355	\$4,382,475	SPECIAL EDUCATION CLUSTER (IDE	\$4,382,475
SPECIAL EDUCATION, GRANTS TO STATES	84.027	71077-ST TN	Tennessee Department of Education	71077-ST TN		\$1,719,815	\$4,382,475	SPECIAL EDUCATION CLUSTER (IDE	\$4,382,475
SPECIAL EDUCATION, GRANTS TO STATES	84.027	VUMC112145(33101-23073GRF5)(PAVE)	State of Tennessee	VUMC112145(33101-23073GRF5)(PAVE)		\$696,778	\$4,382,475	SPECIAL EDUCATION CLUSTER (IDE	\$4,382,475
SPECIAL EDUCATION, GRANTS TO STATES	84.027	VUMC93843(33101-2100433136GR5C)(Edison ID 71430)	Tennessee Department of Education	VUMC93843(33101-2100433136GR5C)(Edison ID 71430)	\$26,843	\$1,959,527	\$4,382,475	SPECIAL EDUCATION CLUSTER (IDE	\$4,382,475
SPECIAL EDUCATION-GRANTS FOR INFANTS AND FAMILIES	84.181	VUMC74130(Edison ID: 82686)	Tennessee Department of Disability and Aging	VUMC74130(Edison ID: 82686)		\$2,056,413	\$2,056,413	N/A	\$0
RESEARCH IN SPECIAL EDUCATION	84.324	R324A240132			\$55,259	\$189,200	\$189,200	RESEARCH AND DEVELOPMENT	\$559,144,589

VANDERBILT UNIVERSITY MEDICAL CENTER
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Fiscal Period 7/1/2024 - 6/30/2025

Federal Awarding Agency/Program Title	Assistance Listing Number	Additional Award Identification (Optional)	Name of Funder Pass-Through Entity	Identifying Number Assigned By Funder Pass-Through Entity	Total Amount Provided to Sub-Recipients	Federal Expenditures	Federal Program Total	Cluster Name	Cluster Total
SPECIAL EDUCATION - PERSONNEL DEVELOPMENT TO IMPROVE SERVICES AND RESULTS FOR CHILDREN WITH DISABILITIES	84.325	H325K190046				\$162,694	\$1,336,895	N/A	\$0
SPECIAL EDUCATION - PERSONNEL DEVELOPMENT TO IMPROVE SERVICES AND RESULTS FOR CHILDREN WITH DISABILITIES	84.325	H325K190064			\$39,502	\$211,984	\$1,336,895	N/A	\$0
SPECIAL EDUCATION - PERSONNEL DEVELOPMENT TO IMPROVE SERVICES AND RESULTS FOR CHILDREN WITH DISABILITIES	84.325	H325K190068			\$25,972	\$218,866	\$1,336,895	N/A	\$0
SPECIAL EDUCATION - PERSONNEL DEVELOPMENT TO IMPROVE SERVICES AND RESULTS FOR CHILDREN WITH DISABILITIES	84.325	H325R230054			\$43,589	\$262,331	\$1,336,895	N/A	\$0
SPECIAL EDUCATION - PERSONNEL DEVELOPMENT TO IMPROVE SERVICES AND RESULTS FOR CHILDREN WITH DISABILITIES	84.325	H325R240078				\$186,201	\$1,336,895	N/A	\$0
SPECIAL EDUCATION - PERSONNEL DEVELOPMENT TO IMPROVE SERVICES AND RESULTS FOR CHILDREN WITH DISABILITIES	84.325	H325R240079			\$6,910	\$188,794	\$1,336,895	N/A	\$0
SPECIAL EDUCATION - PERSONNEL DEVELOPMENT TO IMPROVE SERVICES AND RESULTS FOR CHILDREN WITH DISABILITIES	84.325	VUMC109047(H325D220072)	Vanderbilt University	VUMC109047(H325D220072)		\$23,390	\$1,336,895	N/A	\$0
SPECIAL EDUCATION - PERSONNEL DEVELOPMENT TO IMPROVE SERVICES AND RESULTS FOR CHILDREN WITH DISABILITIES	84.325	VUMC121937(H325D230037)	Vanderbilt University	VUMC121937(H325D230037)		\$23,657	\$1,336,895	N/A	\$0
SPECIAL EDUCATION - PERSONNEL DEVELOPMENT TO IMPROVE SERVICES AND RESULTS FOR CHILDREN WITH DISABILITIES	84.325	VUMC125184(H325D230072)	Vanderbilt University	VUMC125184(H325D230072)		\$58,978	\$1,336,895	N/A	\$0
SPECIAL EDUCATION TECHNICAL ASSISTANCE AND DISSEMINATION TO IMPROVE SERVICES AND RESULTS FOR CHILDREN WITH DISABILITIES	84.326	H326T230022				\$242,524	\$242,524	N/A	\$0
TOTAL DEPARTMENT OF EDUCATION					\$198,075	\$8,207,507			
DEPARTMENT OF ENERGY									
DEPARTMENT OF ENERGY	81.RD	VUMC1110413(DE-AC52-07NA27344)	Lawrence Livermore National Laboratory	VUMC1110413(DE-AC52-07NA27344)		(\$1,326)	(\$1,326)	RESEARCH AND DEVELOPMENT	\$559,144,589
TOTAL DEPARTMENT OF ENERGY						(\$1,326)			
DEPARTMENT OF HEALTH AND HUMAN SERVICES									
GLOBAL AIDS	93.067	5NU2GGH002367-04-11			\$15,889,217	\$17,619,215	\$32,855,869	N/A	\$0
GLOBAL AIDS	93.067	6NU2GGH002367-01-10 (FIGH)(22C6)				\$32,328	\$32,855,869	N/A	\$0
GLOBAL AIDS	93.067	6NU2GGH002367-01-10 (FIGH)(PEC6)				(\$149)	\$32,855,869	N/A	\$0
GLOBAL AIDS	93.067	6NU2GGH002367-03-05 (FIGH)(24LIFT)				\$123,154	\$32,855,869	N/A	\$0
GLOBAL AIDS	93.067	6NU2GGH002367-04-01 (FIGH)(PEPFAR)			\$3,821,522	\$15,057,283	\$32,855,869	N/A	\$0
GLOBAL AIDS	93.067	VUMC128012(NU2GGH002517)	Associacao Centro Pela Saude Global (C-Saude)	VUMC128012(NU2GGH002517)		\$24,038	\$32,855,869	N/A	\$0
GLOBAL AIDS	93.069	VUMC56952(34349-86423)(Edison ID 75941)	State of Tennessee	VUMC56952(34349-86423)(Edison ID 75941)		\$182,482	\$182,482	N/A	\$0
PUBLIC HEALTH EMERGENCY PREPAREDNESS	93.077	5R21DA052026-02			(\$26,784)	(\$25,297)	(\$25,297)	Research and Development	\$559,144,589
FAMILY SMOKING PREVENTION AND TOBACCO CONTROL ACT REGULATORY RESEARCH	93.078	5HITEP220063-03-04				\$227,121	\$231,746	N/A	\$0
STRENGTHENING EMERGENCY CARE DELIVERY IN THE UNITED STATES HEALTHCARE SYSTEM THROUGH HEALTH INFORMATION AND PROMOTION									
STRENGTHENING EMERGENCY CARE DELIVERY IN THE UNITED STATES HEALTHCARE SYSTEM THROUGH HEALTH INFORMATION AND PROMOTION	93.078	6HITEP220063-03-03				\$4,625	\$231,746	N/A	\$0
BLOOD DISORDER PROGRAM: PREVENTION, SURVEILLANCE, AND RESEARCH	93.080	VUMC120940(NU58DD000035-02)	University of Memphis	VUMC120940(NU58DD000035-02)		\$148,459	\$169,313	N/A	\$0
BLOOD DISORDER PROGRAM: PREVENTION, SURVEILLANCE, AND RESEARCH	93.080	VUMC57787(NU27DD000020)	University of North Carolina-Chapel Hill	VUMC57787(NU27DD000020)		\$20,854	\$169,313	N/A	\$0
PREVENTION OF DISEASE, DISABILITY, AND DEATH BY INFECTIOUS DISEASES	93.084	VUMC117929(U54CK000617)	Johns Hopkins University School of Medicine	VUMC117929(U54CK000617)		\$54,485	\$54,485	Research and Development	\$559,144,589
ADVANCING SYSTEM IMPROVEMENTS FOR KEY ISSUES IN WOMEN'S HEALTH	93.088	VUMC119404(ASTWH220111)	University of Mississippi Medical Center	VUMC119404(ASTWH220111)		\$67,907	\$67,907	N/A	\$0
FOOD AND DRUG ADMINISTRATION RESEARCH	93.103	5R01FD006649-04			\$149,796	\$455,436	\$1,290,921	Research and Development	\$559,144,589
FOOD AND DRUG ADMINISTRATION RESEARCH	93.103	5R01FD007627-03			\$76,569	\$458,432	\$1,290,921	Research and Development	\$559,144,589
FOOD AND DRUG ADMINISTRATION RESEARCH	93.103	VUMC102712(Master VUMC86922)(WO2015)	Harvard Pilgrim Health Care	VUMC102712(Master VUMC86922)(WO2015)	\$26,984	\$35,698	\$1,290,921	Research and Development	\$559,144,589
FOOD AND DRUG ADMINISTRATION RESEARCH	93.103	VUMC116896(Master VUMC85508)(WO1085)(75F40119D10037)	Harvard Pilgrim Health Care	VUMC116896(Master VUMC85508)(WO1085)(75F40119D10037)		\$10,493	\$1,290,921	Research and Development	\$559,144,589
FOOD AND DRUG ADMINISTRATION RESEARCH	93.103	VUMC117123(Master VUMC85508)(WO1088)(75F40119D10037)	Harvard Pilgrim Health Care	VUMC117123(Master VUMC85508)(WO1088)(75F40119D10037)		\$11,051	\$1,290,921	Research and Development	\$559,144,589
FOOD AND DRUG ADMINISTRATION RESEARCH	93.103	VUMC120501(U01FD007583)	The Queens Medical Center	VUMC120501(U01FD007583)		\$14,683	\$1,290,921	Research and Development	\$559,144,589
FOOD AND DRUG ADMINISTRATION RESEARCH	93.103	VUMC128032	University of California-San Francisco	VUMC128032		\$28,675	\$1,290,921	Research and Development	\$559,144,589
FOOD AND DRUG ADMINISTRATION RESEARCH	93.103	VUMC78190(R01FD006371)	Cumberland Pharmaceuticals Inc	VUMC78190(R01FD006371)		\$42,080	\$1,290,921	Research and Development	\$559,144,589
FOOD AND DRUG ADMINISTRATION RESEARCH	93.103	VUMC89880(Master VUMC85505)(WO1000.3)(75F40119D10037)	Harvard Pilgrim Health Care	VUMC89880(Master VUMC85505)(WO1000.3)(75F40119D10037)		\$109,485	\$1,290,921	Research and Development	\$559,144,589
FOOD AND DRUG ADMINISTRATION RESEARCH	93.103	VUMC89881(WO1079)(75F410119D10037)(Master VUMC85508)	Harvard Pilgrim Health Care	VUMC89881(WO1079)(75F410119D10037)(Master VUMC85508)		\$29,753	\$1,290,921	Research and Development	\$559,144,589
FOOD AND DRUG ADMINISTRATION RESEARCH	93.103	VUMC89882(Master VUMC86922)(WO2000.4)	Harvard Pilgrim Health Care	VUMC89882(Master VUMC86922)(WO2000.4)		\$25,725	\$1,290,921	Research and Development	\$559,144,589
FOOD AND DRUG ADMINISTRATION RESEARCH	93.103	VUMC89883(Master VUMC86922)(75F40119D10037/75F40119F19002)(WO2023)	Harvard Pilgrim Health Care	VUMC89883(Master VUMC86922)(75F40119D10037/75F40119F19002)(WO2023)		\$2,353	\$1,290,921	Research and Development	\$559,144,589
FOOD AND DRUG ADMINISTRATION RESEARCH	93.103	VUMC93894(Master VUMC86922)(75F40119D10037/75F40119F19002)(WO2006)	Harvard Pilgrim Health Care	VUMC93894(Master VUMC86922)(75F40119D10037/75F40119F19002)(WO2006)		\$16,464	\$1,290,921	Research and Development	\$559,144,589
FOOD AND DRUG ADMINISTRATION RESEARCH	93.103	VUMC96367(R01FD007290)	Mayo Clinic Hospital	VUMC96367(R01FD007290)		\$50,593	\$1,290,921	Research and Development	\$559,144,589
COMPREHENSIVE COMMUNITY MENTAL HEALTH SERVICES FOR CHILDREN WITH SERIOUS EMOTIONAL DISTURBANCES (SED)	93.104	VUMC68875(72274 EDISON ID 6442)	TN Dept of Mental Health and Substance Abuse Services (Changed 2012)	VUMC68875(72274 EDISON ID 6442)		\$159,159	\$159,159	N/A	\$0
MATERNAL AND CHILD HEALTH FEDERAL CONSOLIDATED PROGRAMS	93.110	5T73MC30767-10-00			\$326,025	\$929,182	\$5,760,179	N/A	\$0
MATERNAL AND CHILD HEALTH FEDERAL CONSOLIDATED PROGRAMS	93.110	H6MMC33236				\$82,029	\$5,760,179	N/A	\$0
MATERNAL AND CHILD HEALTH FEDERAL CONSOLIDATED PROGRAMS	93.110	VUMC107602(Edison ID 80267)	Tennessee Department of Health Services	VUMC107602(Edison ID 80267)		\$367,529	\$5,760,179	N/A	\$0
MATERNAL AND CHILD HEALTH FEDERAL CONSOLIDATED PROGRAMS	93.110	VUMC118529(UC4MC49476)	American College of Obstetricians and Gynecologists	VUMC118529(UC4MC49476)		\$19,827	\$5,760,179	N/A	\$0
MATERNAL AND CHILD HEALTH FEDERAL CONSOLIDATED PROGRAMS	93.110	VUMC40097(H30MC24046)	Hemophilia of Georgia, Inc.	VUMC40097(H30MC24046)		\$4,361,612	\$5,760,179	N/A	\$0
ENVIRONMENTAL HEALTH	93.113	1R01ES035518-01A1			\$147,160	\$507,845	\$897,699	Research and Development	\$559,144,589
ENVIRONMENTAL HEALTH	93.113	5R01ES031401-05			\$153,218	\$212,564	\$897,699	Research and Development	\$559,144,589
ENVIRONMENTAL HEALTH	93.113	R01 ES027845	Columbia University	R01 ES027845		(\$252)	\$897,699	Research and Development	\$559,144,589
ENVIRONMENTAL HEALTH	93.113	VUMC103156(T32ES007028)	Vanderbilt University	VUMC103156(T32ES007028)		\$12,743	\$897,699	Research and Development	\$559,144,589
ENVIRONMENTAL HEALTH	93.113	VUMC117516(R01ES034014)	Brown University	VUMC117516(R01ES034014)		\$78,801	\$897,699	Research and Development	\$559,144,589
ENVIRONMENTAL HEALTH	93.113	VUMC118483(T32ES007028)	Vanderbilt University	VUMC118483(T32ES007028)		\$25,299	\$897,699	Research and Development	\$559,144,589
ENVIRONMENTAL HEALTH	93.113	VUMC132332(T32ES007028)	Vanderbilt University	VUMC132332(T32ES007028)		\$60,660	\$897,699	Research and Development	\$559,144,589
ENVIRONMENTAL HEALTH	93.113	VUMC78863(R01ES010563)	Purdue University	VUMC78863(R01ES010563)		\$39	\$897,699	Research and Development	\$559,144,589
ORAL DISEASES AND DISORDERS RESEARCH	93.121	5R01DE027749-05				\$23,972	\$204,013	Research and Development	\$559,144,589
ORAL DISEASES AND DISORDERS RESEARCH	93.121	7K23DE028010-06				\$67,336	\$204,013	Research and Development	\$559,144,589
ORAL DISEASES AND DISORDERS RESEARCH	93.121	VUMC119624(U01DE033241)	Meharry Medical College	VUMC119624(U01DE033241)		\$22,707	\$204,013	Research and Development	\$559,144,589
ORAL DISEASES AND DISORDERS RESEARCH	93.121	VUMC120156(R01DE032366)	University of Utah	VUMC120156(R01DE032366)		\$48,261	\$204,013	Research and Development	\$559,144,589
ORAL DISEASES AND DISORDERS RESEARCH	93.121	VUMC91537(R01DE029650)	University of Kentucky	VUMC91537(R01DE029650)		\$41,479	\$204,013	Research and Development	\$559,144,589
ORAL DISEASES AND DISORDERS RESEARCH	93.121	VUMC96314(R01DE029650)	University of Kentucky	VUMC96314(R01DE029650)		\$258	\$204,013	Research and Development	\$559,144,589
EMERGENCY MEDICAL SERVICES FOR CHILDREN	93.127	5H33MC31540-09-00				\$191,334	\$191,405	N/A	\$0
EMERGENCY MEDICAL SERVICES FOR CHILDREN	93.127	6H33MC31540-06-02				\$71	\$191,405	N/A	\$0
CENTERS FOR RESEARCH AND DEMONSTRATION FOR HEALTH PROMOTION AND DISEASE PREVENTION	93.135	VUMC94306(4100091732)	University of Pennsylvania	VUMC94306(4100091732)		\$30,142	\$30,142	Research and Development	\$559,144,589
INJURY PREVENTION AND CONTROL RESEARCH AND STATE AND COMMUNITY BASED PROGRAMS	93.136	VUMC79280	Tennessee Department of Health Services	VUMC79280		\$96,286	\$96,286	N/A	\$0

VANDERBILT UNIVERSITY MEDICAL CENTER
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HIV-RELATED TRAINING AND TECHNICAL ASSISTANCE	93.145	5TR7HA53203-02-00			\$2,279,208	\$4,143,501	\$5,300,118	N/A	\$0	
HIV-RELATED TRAINING AND TECHNICAL ASSISTANCE	93.145	6U1OHA30535-08-06			\$955,147	\$919,049	\$5,300,118	N/A	\$0	
HIV-RELATED TRAINING AND TECHNICAL ASSISTANCE	93.145	VUMC106754(U1SHA46532)	Columbia University	VUMC106754(U1SHA46532)		\$237,568	\$5,300,118	N/A	\$0	
COORDINATED SERVICES AND ACCESS TO RESEARCH FOR WOMEN, INFANTS, CHILDREN, AND YOUTH	93.153	5H12HA30750-09-00				\$544,368	\$544,368	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	1K08HG014001-01				\$71,703	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	1U01HG013771-01				\$734,449	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	1U01HG013776-01				\$408,221	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	3RM1HGO09034-08S1			\$259,146	\$847,234	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	3U01HG010232-05S2			\$583,622	\$1,123,494	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	3U01HG011166-05S1			\$367,646	\$3,374,528	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	5R00HG010493-05				\$189,371	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	5R00HG010904-05				\$172,103	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	5R00HG011367-04				\$183,390	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	5R01HG010863-04			\$5,000	\$393,422	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	5R01HG011138-05				\$102,653	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	5R01HG011405-04			\$27,688	\$199,327	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	5R01HG012262-04			\$505,999	\$825,068	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	5R01HG012657-03				\$993,625	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	5R25HG012915-02				\$322,774	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	5R35HG010718-05				(\$2,357)	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	5T32HG008341-09				\$231,214	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	5U01HG011181-05			\$14,360	\$1,714,736	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	5U24HG013233-02			\$815,222	\$1,436,002	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	VUMC100777(R01HG011598)	University of Louisville	VUMC100777(R01HG011598)		\$83,864	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	VUMC111607(R01HG011886)	Translational Genomics Research Institute	VUMC111607(R01HG011886)		\$10,501	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	VUMC117671(U24HG010262)	Broad Institute of MIT and Harvard	VUMC117671(U24HG010262)		\$251,728	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	VUMC118546(U01HG013189)	University of California at San Diego	VUMC118546(U01HG013189)		\$320,387	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	VUMC119469(R01HG012748)	University of Texas Health Sciences Center at Houston	VUMC119469(R01HG012748)		\$122,845	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	VUMC120947(R01HG010092)	Cleveland Clinic Lerner College of Medicine	VUMC120947(R01HG010092)		\$21,887	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	VUMC122151(R21HG013413)	NorthShore University HealthSystem	VUMC122151(R21HG013413)		\$18,980	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	VUMC129146(Y01HG010225)	Duke University	VUMC129146(Y01HG010225)		\$13,121	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	VUMC130331(U54HG012510)	Yale University	VUMC130331(U54HG012510)		\$78,788	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	VUMC72226(U24HG010262)	Broad Institute of MIT and Harvard	VUMC72226(U24HG010262)		\$4	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	VUMC95052(U01HG011720)	University of North Carolina-Chapel Hill	VUMC95052(U01HG011720)		\$232,685	\$14,678,843	Research and Development	\$559,144,589	
HUMAN GENOME RESEARCH	93.172	VUMC97941(U01HG011723)	Broad Institute of MIT and Harvard	VUMC97941(U01HG011723)		\$203,996	\$14,678,843	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	1R01DC021559-01A1				\$171,995	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	1R56DC019113-01A1				(\$75)	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	2R01DC017926-06A1				\$108,537	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	3R01DC013270-10S1			\$151,948	\$717,932	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	3R01DC017683-05S1				\$25,076	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	3R21DC019280-01A1				\$131,354	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5K08DC019683-05				\$104,981	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5K99DC021501-02				\$116,328	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R01DC015388-06				(\$1,275)	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R01DC015988-05			\$374,308	\$368,954	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R01DC016977-05				(\$46,050)	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R01DC017175-05			\$140,634	\$147,281	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R01DC017926-05			\$233,455	\$348,009	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R01DC019088-06			\$75,593	\$471,723	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R01DC019648-04			\$79,934	\$478,604	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R01DC020186-04			\$94,105	\$885,125	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R01DC020194-03			\$416,193	\$662,246	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R01DC020311-04			\$45,717	\$500,142	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R01DC020715-03			\$399,252	\$570,837	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R01DC020888-02				\$1,710	\$577,563	\$9,817,883	Research and Development	\$559,144,589
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R01DC021188-02			\$79,721	\$377,979	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R01DC021698-02			\$187,752	\$536,279	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R03DC021550-02				\$245,934	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R13DC020098-03				\$32,578	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R13DC021381-03				\$30,069	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R21DC019382-03			\$9,185	\$137,137	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R21DC020017-04				\$261,182	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R21DC021254-02			\$28,034	\$231,512	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R21DC021276-03				\$282,438	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R21DC022058-02				\$194,650	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5R25DC020728-03				\$171,336	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5T35DC008763-16				\$10	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5T35DC008763-18			\$21,168	\$68,819	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	5U01DC016033-05				\$114,721	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	7R21DC018656-04			\$2,306	\$146,704	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	R44 DC018491	Intelligent Hearing Systems Corporation	R44 DC018491		(\$72)	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	VUMC (R01DC020194)	Hearts for Hearing	VUMC (R01DC020194)		\$23,414	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	VUMC/R44DC022803-01	Xyken, LLC	VUMC/R44DC022803-01		\$4,610	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	VUMC111082(U24DC020857)	Stanford University	VUMC111082(U24DC020857)		(\$16,779)	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	VUMC111300	Vanderbilt University	VUMC111300		\$27,373	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	VUMC112087(R01DC020048)	Georgia Institute of Technology	VUMC112087(R01DC020048)		\$72,461	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	VUMC113732(R01DC020936)	Washington University	VUMC113732(R01DC020936)		\$90,611	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	VUMC117186(R01DC000151)	Southern Illinois University Carbondale	VUMC117186(R01DC000151)		\$5,086	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	VUMC122174(R01DC016919)	Stanford University	VUMC122174(R01DC016919)		\$180,782	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	VUMC127965(2R01DC015997-06)	University of Iowa	VUMC127965(2R01DC015997-06)		\$169,661	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	VUMC66370(R01DC015997)	University of Iowa	VUMC66370(R01DC015997)		(\$40)	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	VUMC75320(R01DC016680)	Creighton University	VUMC75320(R01DC016680)		(\$904)	\$9,817,883	Research and Development	\$559,144,589	
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.17									

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Fiscal Period 7/1/2024 - 6/30/2025

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RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	VUMC86738(R44DC016780)	Mimosa Acoustics, Inc	VUMC86738(R44DC016780)		\$0	\$9,817,883	Research and Development	\$559,144,589
RESEARCH RELATED TO DEAFNESS AND COMMUNICATION DISORDERS	93.173	VUMC86859(R01DC014037)	Vanderbilt University	VUMC86859(R01DC014037)		\$56,387	\$9,817,883	Research and Development	\$559,144,589
IMMUNIZATION RESEARCH, DEMONSTRATION, PUBLIC INFORMATION AND EDUCATION TRAINING AND CLINICAL SKILLS IMPROVEMENT PROJECTS	93.185	5U01IP001156-04-00				\$1,432,347	\$2,578,381	Research and Development	\$559,144,589
IMMUNIZATION RESEARCH, DEMONSTRATION, PUBLIC INFORMATION AND EDUCATION TRAINING AND CLINICAL SKILLS IMPROVEMENT PROJECTS	93.185	6U01IP001156-02-01 (COVID)				\$0	\$2,578,381	Research and Development	\$559,144,589
IMMUNIZATION RESEARCH, DEMONSTRATION, PUBLIC INFORMATION AND EDUCATION TRAINING AND CLINICAL SKILLS IMPROVEMENT PROJECTS	93.185	6U01IP001156-03-02 (Comp C)				\$903,105	\$2,578,381	Research and Development	\$559,144,589
IMMUNIZATION RESEARCH, DEMONSTRATION, PUBLIC INFORMATION AND EDUCATION TRAINING AND CLINICAL SKILLS IMPROVEMENT PROJECTS	93.185	VUMC109397(U01IP001116)	Johns Hopkins University School of Medicine	VUMC109397(U01IP001116)		\$201,079	\$2,578,381	Research and Development	\$559,144,589
IMMUNIZATION RESEARCH, DEMONSTRATION, PUBLIC INFORMATION AND EDUCATION TRAINING AND CLINICAL SKILLS IMPROVEMENT PROJECTS	93.185	VUMC78271(U01P001116)	Johns Hopkins University School of Medicine	VUMC78271(U01P001116)		\$27,170	\$2,578,381	Research and Development	\$559,144,589
IMMUNIZATION RESEARCH, DEMONSTRATION, PUBLIC INFORMATION AND EDUCATION TRAINING AND CLINICAL SKILLS IMPROVEMENT PROJECTS	93.185	VUMC90573(U01IP001116)	Johns Hopkins University School of Medicine	VUMC90573(U01IP001116)		\$14,680	\$2,578,381	Research and Development	\$559,144,589
RESEARCH AND TRAINING IN COMPLEMENTARY AND INTEGRATIVE HEALTH	93.213	5K23AT011569-04				\$141,348	\$393,948	Research and Development	\$559,144,589
RESEARCH AND TRAINING IN COMPLEMENTARY AND INTEGRATIVE HEALTH	93.213	5R01AT011456-03				\$100,538	\$393,948	Research and Development	\$559,144,589
RESEARCH AND TRAINING IN COMPLEMENTARY AND INTEGRATIVE HEALTH	93.213	VUMC108435(UG3AT012257)	Oregon Health & Science University	VUMC108435(UG3AT012257)		\$124,420	\$393,948	Research and Development	\$559,144,589
RESEARCH AND TRAINING IN COMPLEMENTARY AND INTEGRATIVE HEALTH	93.213	VUMC116869(U24AT012602)	Trustees of Indiana University	VUMC116869(U24AT012602)		\$2,717	\$393,948	Research and Development	\$559,144,589
RESEARCH AND TRAINING IN COMPLEMENTARY AND INTEGRATIVE HEALTH	93.213	VUMC68136(R01AT009680)	Rush University Medical Center	VUMC68136(R01AT009680)		\$24,925	\$393,948	Research and Development	\$559,144,589
HEALTH CENTER PROGRAM (COMMUNITY HEALTH CENTERS, MIGRANT HEALTH CENTERS, HEALTH CARE FOR THE HOMELESS, AND PUBLIC HOUSING PRIMARY CARE)	93.224	VUMC125461 (H8ICS46992)	Matthew-Walker	VUMC125461 (H8ICS46992)		\$124,000	\$290,526	N/A	\$0
HEALTH CENTER PROGRAM (COMMUNITY HEALTH CENTERS, MIGRANT HEALTH CENTERS, HEALTH CARE FOR THE HOMELESS, AND PUBLIC HOUSING PRIMARY CARE)	93.224	VUMC125916 (H81CS48972-01-00)	ARcare	VUMC125916 (H81CS48972-01-00)		\$124,000	\$290,526	N/A	\$0
HEALTH CENTER PROGRAM (COMMUNITY HEALTH CENTERS, MIGRANT HEALTH CENTERS, HEALTH CARE FOR THE HOMELESS, AND PUBLIC HOUSING PRIMARY CARE)	93.224	VUMC125943 (H8ICS48977)	Family Health Care Clinic, Inc.	VUMC125943 (H8ICS48977)		\$42,526	\$290,526	N/A	\$0
NATIONAL RESEARCH SERVICE AWARDS HEALTH SERVICES RESEARCH TRAINING	93.225	5T32HS026122-07			\$116,990	\$681,130	\$681,130	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	1R01HS030234-01				\$277,092	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	5K01HS029042-03				\$117,275	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	5K08HS029695-02				\$145,281	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	5K12HS026395-05				\$3,914	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	5P30HS029767-02			\$42,068	\$785,753	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	5R01HS028430-04			\$165,519	\$411,474	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	5R01HS029331-03			\$54,527	\$473,582	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	5R03HS029218-02				\$32,149	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	5R18HS025910-05				\$652	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	5R18HS025931-05			\$111,661	\$161,595	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	5R18HS026158-05			\$3,389	\$20,850	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	5R18HS026616-04				\$2,891	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	VUMC (R18HS029638)	Ann & Robert H. Lurie Children's Hospital of Chicago	VUMC (R18HS029638)		\$65,507	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	VUMC104366 (R18HS028579)	Oregon Health & Science University	VUMC104366 (R18HS028579)		\$206,030	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	VUMC107954(R01HS029153)	Denver Health and Hospital Authority	VUMC107954(R01HS029153)		\$8,123	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	VUMC108018(HS029011)	University of Maryland Baltimore	VUMC108018(HS029011)		\$53,714	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	VUMC108079(SR18HS028578)	University of Colorado	VUMC108079(SR18HS028578)		\$110,655	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	VUMC108918(R01HS028007)	Brigham and Women's Hospital	VUMC108918(R01HS028007)		\$115,312	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	VUMC112760 (R33HS028880)	Parkview Hospital, Inc.	VUMC112760 (R33HS028880)		\$11,644	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	VUMC116823(R18HS028955)	Intermountain Medical Center	VUMC116823(R18HS028955)		\$338,950	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	VUMC117627(R18HS029300)	University of Utah	VUMC117627(R18HS029300)		\$238,084	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	VUMC132098(R01HS029153)	IHC Health Services, Inc.	VUMC132098(R01HS029153)		\$35,065	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	VUMC136628(R18HS028409)	University of Wisconsin	VUMC136628(R18HS028409)		\$30,831	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	VUMC136821(R01HS028669)	University of Wisconsin Madison	VUMC136821(R01HS028669)		\$11,943	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	VUMC80355(R01HS026742)	Washington University	VUMC80355(R01HS026742)		\$7,373	\$3,844,032	Research and Development	\$559,144,589
RESEARCH ON HEALTHCARE COSTS, QUALITY AND OUTCOMES	93.226	VUMC86935 (R01HS027417)	University of Colorado Anschutz Medical Center	VUMC86935 (R01HS027417)		\$37,708	\$3,844,032	Research and Development	\$559,144,589
NATIONAL CENTER ON SLEEP DISORDERS RESEARCH	93.233	5R01HL161635-04				\$494,382	\$494,382	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	1F32MH134612-01A1				\$71,560	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	1K23MH137397-01A1				\$24,923	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	1R01MH135028-01A1				\$304,331	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	1R01MH135738-01			\$282,854	\$438,055	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	1R01MH139379-01				\$35,130	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	1R21MH134061-01A1				\$181,774	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	1RF1MH123201-01A1 (Yr 3)				(\$11,611)	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	3R01MH102272-10S1				\$238,425	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	3R01MH132022-03S1			\$222,479	\$800,606	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5K23MH122737-04				\$23,002	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5K23MH126313-05				\$156,023	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5K23MH134136-02				\$142,706	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5K24MH126280-04				\$143,088	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R01MH070560-16			\$23,677	\$769,881	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R01MH111599-07			\$7,817	\$490,506	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R01MH113362-05			(\$987)	\$17,827,264	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R01MH115000-04			(\$13,336)	(\$13,336)	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R01MH116058-05			\$247,827	\$481,108	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R01MH118273-05			\$461,165	\$715,346	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R01MH121438-05			\$360,564	\$822,851	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R01MH121455-05				\$328,924	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R01MH121620-05			\$28,521	\$862,865	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R01MH123563-05			\$64,909	\$379,581	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R01MH123662-05			\$1,298,131	\$2,615,375	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R01MH127018-05			\$83,326	\$719,500	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R01MH127228-04			\$370,562	\$763,292	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R01MH131721-03			\$82,627	\$718,813	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R01MH137024-02			\$71,095	\$645,348	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R21MH128790-02				\$1,459	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R21MH132040-02			\$18,106	\$204,482	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R33MH120149-03				\$162,923	\$17,827,264	Research and Development	\$559,144,589

VANDERBILT UNIVERSITY MEDICAL CENTER
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Fiscal Period 7/1/2024 - 6/30/2025

Federal Awarding Agency/Program Title	Assistance Listing Number	Additional Award Identification (Optional)	Name of Funder Pass-Through Entity	Identifying Number Assigned By Funder Pass-Through Entity	Total Amount Provided to Sub-Recipients	Federal Expenditures	Federal Program Total	Cluster Name	Cluster Total
MENTAL HEALTH RESEARCH GRANTS	93.242	5R33MH122464-05			\$60,606	\$834,894	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R33MH123029-05			\$42,382	\$297,667	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R34MH124496-03			\$27,266	\$59,574	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R34MH127975-03			\$22,258	\$159,973	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R34MH132711-02				\$175,725	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	5R56MH128747-02			\$101,825	\$131,359	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC (1R01MH136215-01A1)	St. Jude's Research Hospital	VUMC (1R01MH136215-01A1)		\$4,545	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC100105(RF1MH125933)	Vanderbilt University	VUMC100105(RF1MH125933)		\$0	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC100392(R01MH127317)	University of Texas, Southwestern Med Center	VUMC100392(R01MH127317)		\$23,622	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC100934(R01MH115932)	University of Texas, Southwestern Med Center	VUMC100934(R01MH115932)		\$3,045	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC102507(R01MH126459)	SUNY Upstate Medical University Hospital, Downtown Campus	VUMC102507(R01MH126459)		\$239,876	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC106896(1R01MH130581)	University of California Los Angeles	VUMC106896(1R01MH130581)		\$26,251	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC107559(R01MH112847)	University of Pennsylvania	VUMC107559(R01MH112847)		\$100,794	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC112290(R01MH129764)	University of New Mexico	VUMC112290(R01MH129764)		\$68,885	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC112622(R01MH130364)	Vanderbilt University	VUMC112622(R01MH130364)		\$155,576	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC112806(R01MH132686)	Vanderbilt University	VUMC112806(R01MH132686)		\$366,990	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC113077(T32MH065215)	Vanderbilt University	VUMC113077(T32MH065215)		\$54,414	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC113730(P50MH132642)	Princeton University	VUMC113730(P50MH132642)		\$413,727	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC114642(RF1MH133427)	Johns Hopkins University Bloomberg School of Public Health	VUMC114642(RF1MH133427)		\$38,018	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC115226(R44MH134706)	Behavior Imaging Solutions	VUMC115226(R44MH134706)		\$36,062	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC116273(R01MH133843)	Childrens Hospital of Philadelphia	VUMC116273(R01MH133843)		\$25,447	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC118827(R01MH131950)	Vanderbilt University	VUMC118827(R01MH131950)		\$4,083	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC120106(R01MH132733)	Icahn School of Medicine at Mount Sinai	VUMC120106(R01MH132733)		\$169,693	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC122615(SR01MH130537-02)	Vanderbilt University	VUMC122615(SR01MH130537-02)		\$97,745	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC123861(ST32MH065215-20)	Vanderbilt University	VUMC123861(ST32MH065215-20)		\$61,485	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC126062(R01MH136399)	Vanderbilt University	VUMC126062(R01MH136399)		\$18,640	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC127834(R42MH135602)	VoiceLove LLC	VUMC127834(R42MH135602)		\$252,428	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC128464(1R01MH137695-01)	Vanderbilt University	VUMC128464(1R01MH137695-01)		\$20,480	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC132017(R01MH137220)	Icahn School of Medicine at Mount Sinai	VUMC132017(R01MH137220)		\$317,149	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC136466	University of Denver	VUMC		\$11,206	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC81905(R01MH121407)	Portland State University	VUMC81905(R01MH121407)		\$73,659	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC86934(R01MH124671)	Vanderbilt University	VUMC86934(R01MH124671)		\$44,527	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC88939(R01MH120588)	Indiana University	VUMC88939(R01MH120588)		\$12,023	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC92769(R01MH123155)	Yale University	VUMC92769(R01MH123155)		\$218,040	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC93056(R01MH123687)	Vanderbilt University	VUMC93056(R01MH123687)		\$91,832	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC94579(R01MH124851)	Massachusetts General Hospital	VUMC94579(R01MH124851)		(\$2,519)	\$17,827,264	Research and Development	\$559,144,589
MENTAL HEALTH RESEARCH GRANTS	93.242	VUMC98459(K01MH125073)	Vanderbilt University	VUMC98459(K01MH125073)		\$4,406	\$17,827,264	Research and Development	\$559,144,589
SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES PROJECTS OF REGIONAL AND NATIONAL SIGNIFICANCE	93.243	VUMC132825 (H79T1087262)	University of Mississippi Medical Center	VUMC132825 (H79T1087262)		\$24,771	N/A		\$0
ADVANCED NURSING EDUCATION WORKFORCE GRANT PROGRAM	93.247	VUMC123275(T59HP49666)	Vanderbilt University	VUMC123275(T59HP49666)		\$189,669	\$189,669	N/A	\$0
GERIATRIC ACADEMIC CAREER AWARDS DEPARTMENT OF HEALTH AND HUMAN SERVICES	93.250	5K01HP49070-03-00				\$63,111	\$63,111	N/A	\$0
EARLY HEARING DETECTION AND INTERVENTION	93.251	VUMC79629(34347-75420)(Edison I				\$47,492	\$47,492	N/A	\$0
POISON CENTER SUPPORT AND ENHANCEMENT GRANT	93.253	2H4BHS30752-09-00				\$364,725	\$427,021	N/A	\$0
POISON CENTER SUPPORT AND ENHANCEMENT GRANT	93.253	6H4BHS30752-08-02				\$62,296	\$427,021	N/A	\$0
OCCUPATIONAL SAFETY AND HEALTH PROGRAM	93.262	VUMC96527(U01OHO12271)	COM Affiliation, Inc. (Albert Einstein College of Medicine managed by Montefiore)	VUMC96527(U01OHO12271)		\$871	\$871	N/A	\$0
IMMUNIZATION COOPERATIVE AGREEMENTS	93.268	VUMC107135(NH23IP922617)	Cumberland Pediatric Foundation	VUMC107135(NH23IP922617)		(\$1,862)	(\$1,862)	N/A	\$0
ALCOHOL RESEARCH PROGRAMS	93.273	5P01AA029542-04			\$772,529	\$1,901,819	\$2,216,495	Research and Development	\$559,144,589
ALCOHOL RESEARCH PROGRAMS	93.273	5R03AA030100-02			\$529	(\$8,277)	\$2,216,495	Research and Development	\$559,144,589
ALCOHOL RESEARCH PROGRAMS	93.273	5U01AA026222-05			\$68,607	\$64,590	\$2,216,495	Research and Development	\$559,144,589
ALCOHOL RESEARCH PROGRAMS	93.273	VUMC122666(P60AA031124)	Vanderbilt University	VUMC122666(P60AA031124)		\$35,743	\$2,216,495	Research and Development	\$559,144,589
ALCOHOL RESEARCH PROGRAMS	93.273	VUMC131948(R01AA031640)	Brown University	VUMC131948(R01AA031640)		\$159,401	\$2,216,495	Research and Development	\$559,144,589
ALCOHOL RESEARCH PROGRAMS	93.273	VUMC80955(R01AA027654)	University of Iowa	VUMC80955(R01AA027654)		\$63,219	\$2,216,495	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	1R01DA056436-01A1			\$31,469	\$36,493	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	1UG3NS135551-01 (yr 2)			\$156,752	\$1,054,659	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	3R01DA045729-04S1			(\$2,573)	(\$2,573)	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	5K01DA050740-05				\$145,375	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	5K01DA051683-04				\$164,405	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	5K01DA057391-03				\$157,259	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	5K08DA058046-02				\$149,928	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	5K12DA061526-02			\$168,785	\$250,290	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	5K23DA047476-05				\$6,219	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	5K23DA057387-03				\$167,711	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	5K23DA059690-02				\$166,740	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	5R01DA040630-10			\$42,971	\$477,823	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	5R01DA050334-05			\$150,756	\$619,996	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	5R01DA057129-03				\$464,563	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	5R34DA054483-02			\$35,173	\$33,141	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	7DP1DA056667-04				\$314,043	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	VUMC108470(5R01DA057204-03)	Meharry Medical College	VUMC108470(5R01DA057204-03)		\$290,652	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	VUMC108919(U24DA055325)	Vanderbilt University	VUMC108919(U24DA055325)		(\$3,875)	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	VUMC115940(U24DA055325)	Vanderbilt University	VUMC115940(U24DA055325)		\$68,961	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	VUMC118177(U01DA055347)	Vanderbilt University	VUMC118177(U01DA055347)		\$444,888	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	VUMC120625(RM1DA059365)	University of Pittsburgh	VUMC120625(RM1DA059365)		\$81,137	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	VUMC122153(UG1DA013732)	University of Cincinnati	VUMC122153(UG1DA013732)		\$43,022	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	VUMC125433	University of Pittsburgh	VUMC125433		\$131,440	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	VUMC84383(UG1DA015831)	Yale University	VUMC84383(UG1DA015831)		(\$38)	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	VUMC84487(UG1DA013732)	University of Cincinnati	VUMC84487(UG1DA013732)		\$229,316	\$6,140,017	Research and Development	\$559,144,589
DRUG USE AND ADDICTION RESEARCH PROGRAMS	93.279	VUMC97541(U01DA055347)	Vanderbilt University	VUMC97541(U01DA055347)		\$648,442	\$6,140,017	Research and Development	\$559,144,589
CENTERS FOR DISEASE CONTROL AND PREVENTION INVESTIGATIONS AND TECHNICAL ASSISTANCE	93.283	VUMC102709(75D30120C07986)	Westat, Inc.	VUMC102709(75D30120C07986)		\$59,137	\$112,531	N/A	\$0
CENTERS FOR DISEASE CONTROL AND PREVENTION INVESTIGATIONS AND TECHNICAL ASSISTANCE	93.283	VUMC103591(75D30121C10168)	Medical University of South Carolina	VUMC103591(75D30121C10168)		\$15,776	\$112,531	N/A	\$0
CENTERS FOR DISEASE CONTROL AND PREVENTION INVESTIGATIONS AND TECHNICAL ASSISTANCE	93.283	VUMC87165	The Task Force for Global Health	VUMC87165		\$37,618	\$112,531	N/A	\$0
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	1U18EB029351-01				\$20,578	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	5K01EB030039-04				(\$346)	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	5K01EB032898-04				\$168,347	\$4,501,367	Research and Development	\$559,144,589

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Federal Awarding Agency/Program Title									
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	5R01EB018992-08				\$57,226	\$183,802	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	5R01EB029443-04					\$181,453	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	5R01EB031078-04			\$35,019	\$634,135	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	5R01EB031954-04			\$44,516	\$426,554	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	5R01EB033676-04				\$651,066	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	5R01EB036368-02				\$363,764	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	5R03EB034366-02				\$94,941	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	5R21EB029639-03				\$0	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	5R21EB032916-02				\$100,092	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	5T32EB001628-20			\$16,373	\$17,683	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	5T32EB001628-23			\$116,849	\$426,350	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	VUMC105957(R01EB033385)	Vanderbilt University	VUMC105957(R01EB033385)		\$449,318	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	VUMC106040(R01EB032382)	Vanderbilt University	VUMC106040(R01EB032382)		\$107,491	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	VUMC109503(R01EB033822)	Vanderbilt University	VUMC109503(R01EB033822)		\$9,213	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	VUMC112371(R01EB032807)	University of Massachusetts Medical School	VUMC112371(R01EB032807)	\$11,720	\$161,781	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	VUMC112897(R01EB033788)	Purdue University	VUMC112897(R01EB033788)		\$117,494	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	VUMC116124(R01EB019409)	Vanderbilt University	VUMC116124(R01EB019409)		\$16,619	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	VUMC124229(R42EB029888)	Vanderbilt University	VUMC124229(R42EB029888)		\$23,886	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	VUMC129215(R21EB036443)	Vanderbilt University	VUMC129215(R21EB036443)		\$77,195	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	VUMC129991(R01EB035591)	Vanderbilt University	VUMC129991(R01EB035591)		\$42,929	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	VUMC131168(R21EB035783)	Vanderbilt University	VUMC131168(R21EB035783)		\$37,141	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	VUMC78098(75N93019C00073)	Integral Molecular	VUMC78098(75N93019C00073)		\$7,357	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	VUMC80654(R01EB028615)	Vanderbilt University	VUMC80654(R01EB028615)		\$3,709	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	VUMC90180(R01EB028690)	Vanderbilt University	VUMC90180(R01EB028690)		(\$168)	\$4,501,367	Research and Development	\$559,144,589
DISCOVERY AND APPLIED RESEARCH FOR TECHNOLOGICAL INNOVATIONS TO IMPROVE HUMAN HEALTH	93.286	VUMC97445(R01EB017230)	Vanderbilt University	VUMC97445(R01EB017230)		\$178,983	\$4,501,367	Research and Development	\$559,144,589
MINORITY HEALTH AND HEALTH DISPARITIES RESEARCH	93.307	1R61MD019323-01			\$81,812	\$104,667	\$4,952,660	Research and Development	\$559,144,589
MINORITY HEALTH AND HEALTH DISPARITIES RESEARCH	93.307	3P50MD017347-04S1			\$855,692	\$2,268,016	\$4,952,660	Research and Development	\$559,144,589
MINORITY HEALTH AND HEALTH DISPARITIES RESEARCH	93.307	3U54MD010722-05S1			(\$767)	(\$767)	\$4,952,660	Research and Development	\$559,144,589
MINORITY HEALTH AND HEALTH DISPARITIES RESEARCH	93.307	4R33MD019323-02			\$207,408	\$558,687	\$4,952,660	Research and Development	\$559,144,589
MINORITY HEALTH AND HEALTH DISPARITIES RESEARCH	93.307	5R01MD015396-05			\$43,748	\$679,175	\$4,952,660	Research and Development	\$559,144,589
MINORITY HEALTH AND HEALTH DISPARITIES RESEARCH	93.307	5R01MD016838-04			\$237,743	\$822,970	\$4,952,660	Research and Development	\$559,144,589
MINORITY HEALTH AND HEALTH DISPARITIES RESEARCH	93.307	5R21MD019103-02			\$59,444	\$188,487	\$4,952,660	Research and Development	\$559,144,589
MINORITY HEALTH AND HEALTH DISPARITIES RESEARCH	93.307	VUMC106890(R01MD017529)	University of Texas, Southwestern Med Center	VUMC106890(R01MD017529)	\$14,884	\$42,186	\$4,952,660	Research and Development	\$559,144,589
MINORITY HEALTH AND HEALTH DISPARITIES RESEARCH	93.307	VUMC110094(U54MD007586)	Meharry Medical College	VUMC110094(U54MD007586)		(\$6,853)	\$4,952,660	Research and Development	\$559,144,589
MINORITY HEALTH AND HEALTH DISPARITIES RESEARCH	93.307	VUMC112761(R01MD017046)	Pennsylvania State University	VUMC112761(R01MD017046)		\$4,138	\$4,952,660	Research and Development	\$559,144,589
MINORITY HEALTH AND HEALTH DISPARITIES RESEARCH	93.307	VUMC118161(22X099)	Vanderbilt University	VUMC118161(22X099)		\$15,092	\$4,952,660	Research and Development	\$559,144,589
MINORITY HEALTH AND HEALTH DISPARITIES RESEARCH	93.307	VUMC118169(R01MD017565)	Washington University	VUMC118169(R01MD017565)		\$194,912	\$4,952,660	Research and Development	\$559,144,589
MINORITY HEALTH AND HEALTH DISPARITIES RESEARCH	93.307	VUMC118814(R21MD019228)	University of Rochester	VUMC118814(R21MD019228)		\$46,312	\$4,952,660	Research and Development	\$559,144,589
MINORITY HEALTH AND HEALTH DISPARITIES RESEARCH	93.307	VUMC129252(1R21MD020158-01)	Wake Forest University Health Sciences	VUMC129252(1R21MD020158-01)		\$7,994	\$4,952,660	Research and Development	\$559,144,589
MINORITY HEALTH AND HEALTH DISPARITIES RESEARCH	93.307	VUMC132673 (R01MD020283)	Massachusetts General Hospital	VUMC132673 (R01MD020283)		\$22,236	\$4,952,660	Research and Development	\$559,144,589
MINORITY HEALTH AND HEALTH DISPARITIES RESEARCH	93.307	VUMC70882(R01MD013493)	Duke Clinical Research Institute	VUMC70882(R01MD013493)		\$5,408	\$4,952,660	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	1DP2HD098859-01 (Yr 5)				\$0	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	3OT2OD035404-01S8			\$8,359,373	\$34,753,159	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	3OT2OD035980-01S1			\$346,148	\$922,190	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	3U01HG007674-09S4				(\$2,706)	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	4UH3OD035516-03				\$91,843	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	5DP5OD033412-03				\$362,222	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	5DP5OD029586-05				\$373,199	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	5U24OD035523-02			\$1,305,271	\$10,780,272	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	5U54CA2480915-02			\$731,863	\$1,775,451	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	5UG3OD035516-02				\$1,283,956	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	5UG3OD035517-02				\$1,350,464	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	5UH3CA241685-04			\$114,390	\$18,762	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC107119(U2CHD109731)	Childrens Hospital of Philadelphia	VUMC107119(U2CHD109731)		\$275,922	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC107540(OT2OD032581)	University of North Texas HSC	VUMC107540(OT2OD032581)	\$206,985	\$1,068,553	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC107551(U54DK134302)	Vanderbilt University	VUMC107551(U54DK134302)		\$268,046	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC107967(OT2OD032720)	University of South Florida	VUMC107967(OT2OD032720)		\$259,128	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC114719(U54HG012510)	Yale University	VUMC114719(U54HG012510)		\$703,710	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC116309(UG3OD035521)	Washington University	VUMC116309(UG3OD035521)		\$20,379	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC116808(OT2OD034190)(68-312-0218952-67471L)	RTI International	VUMC116808(OT2OD034190)(68-312-0218952-67471L)		\$127,489	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC118270(U24OD023319)	Northwestern University	VUMC118270(U24OD023319)		\$80,242	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC118498(UG3OD035513)	Northwell Health	VUMC118498(UG3OD035513)		\$142,905	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC120314(1OT2OD032581-02)	Meharry Medical College	VUMC120314(1OT2OD032581-02)		\$47,595	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC122620 (UG3MD018298)	University of Mississippi Medical Center	VUMC122620 (UG3MD018298)		\$7,243	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC122620(UH3MD018298)	University of Mississippi Medical Center	VUMC122620(UH3MD018298)		\$37,989	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC130037(OT2OD037975)	Verily Life Sciences	VUMC130037(OT2OD037975)		\$153,800	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC132902(U2COD023375)	Duke University	VUMC132902(U2COD023375)		\$50,922	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC60166(UG3OD023282)	University of Wisconsin	VUMC60166(UG3OD023282)		(\$27)	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC60166(UG3OD023282)	University of Wisconsin	VUMC60166(UG3OD023282)		(\$391)	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC60258(UH3OD023271)	University of Washington	VUMC60258(UH3OD023271)		\$12,000	\$55,037,523	Research and Development	\$559,144,589
TRANS-NIH RESEARCH SUPPORT	93.310	VUMC78427(U2COD023375)	Duke University	VUMC78427(U2COD023375)		\$73,206	\$55,037,523	Research and Development	\$559,144,589
RARE DISORDERS: RESEARCH, SURVEILLANCE, HEALTH PROMOTION, AND EDUCATION	93.315	6U01DD001234-06M001				\$26,090	\$106,673	Research and Development	\$559,144,589
RARE DISORDERS: RESEARCH, SURVEILLANCE, HEALTH PROMOTION, AND EDUCATION	93.315	6U01DD001235-06M002				\$80,583			

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Fiscal Period 7/1/2024 - 6/30/2025

Federal Awarding Agency/Program Title	Assistance Listing Number	Additional Award Identification (Optional)	Name of Funder Pass-Through Entity	Identifying Number Assigned By Funder Pass-Through Entity	Total Amount Provided to Sub-Recipients	Federal Expenditures	Federal Program Total	Cluster Name	Cluster Total
THE HEALTHY BRAIN INITIATIVE: TECHNICAL ASSISTANCE TO IMPLEMENT PUBLIC HEALTH ACTIONS RELATED TO COGNITIVE HEALTH, COGNITIVE IMPAIRMENT, AND CAREGIVING AT THE STATE AND LOCAL LEVELS	93.334	VUMC123537(Edison ID 84414)	Tennessee Department of Health Services	VUMC123537(Edison ID 84414)		\$192,632	\$192,632	N/A	\$0
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	1R03TR004434-01A1				\$70,445	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	1R03TR004667-01				\$5,755	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	3U24TR001579-07S1				\$4,029	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	5KL2TR002245-09			\$195,169	\$1,028,271	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	5R21TR003942-02				(\$177)	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	5TL1TR002244-09			\$67,832	\$579,422	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	5U24TR004317-03				\$1,054,289	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	5U24TR004432-02			\$653,882	\$5,235,660	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	5U24TR004437-02			\$1,458,622	\$5,310,097	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	SUL1TR002243-09			\$630,222	\$11,381,175	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	U24 TR001608	Duke Clinical Research Institute	U24 TR001608		\$5,453	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	VUMC111272(R01TR003844)	The Hastings Center	VUMC111272(R01TR003844)		\$106,634	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	VUMC111453(UM1TR004400)	COM Affiliation, Inc. (Albert Einstein College of Medicine managed by Montefiore)	VUMC111453(UM1TR004400)		\$7,995	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	VUMC124126	Wake Forest University Health Sciences	VUMC124126		\$106,508	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	VUMC131014(1R21TR004694-01A1)	Duke University	VUMC131014(1R21TR004694-01A1)		\$7,746	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	VUMC71429(U01TR002383)	Vanderbilt University	VUMC71429(U01TR002383)		(\$298)	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	VUMC84000(U01TR003206)	Rockefeller University	VUMC84000(U01TR003206)		\$28,092	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	VUMC92059(U24TR001608)	Duke Clinical Research Institute	VUMC92059(U24TR001608)		\$1,731,849	\$26,704,012	Research and Development	\$559,144,589
NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	93.350	VUMC92473(U24TR001608)	Duke University	VUMC92473(U24TR001608)		\$41,067	\$26,704,012	Research and Development	\$559,144,589
RESEARCH INFRASTRUCTURE PROGRAMS	93.351	1C06OD034125-01				\$36,375	\$1,346,952	Research and Development	\$559,144,589
RESEARCH INFRASTRUCTURE PROGRAMS	93.351	1R24OD035459-01				\$202,240	\$1,346,952	Research and Development	\$559,144,589
RESEARCH INFRASTRUCTURE PROGRAMS	93.351	1S10OD032383-01				\$91,435	\$1,346,952	Research and Development	\$559,144,589
RESEARCH INFRASTRUCTURE PROGRAMS	93.351	1S10OD034315-01			\$417,900	\$417,900	\$1,346,952	Research and Development	\$559,144,589
RESEARCH INFRASTRUCTURE PROGRAMS	93.351	1S10OD034336-01				\$33	\$1,346,952	Research and Development	\$559,144,589
RESEARCH INFRASTRUCTURE PROGRAMS	93.351	1S10OD036357-01				\$598,969	\$1,346,952	Research and Development	\$559,144,589
21ST CENTURY CURES ACT - BEAU BIDEN CANCER MOONSHOT	93.353	3U2CCA233291-01S2			\$80,477	\$67,741	\$907,422	Research and Development	\$559,144,589
21ST CENTURY CURES ACT - BEAU BIDEN CANCER MOONSHOT	93.353	5U01CA254832-05			\$205,420	\$675,658	\$907,422	Research and Development	\$559,144,589
21ST CENTURY CURES ACT - BEAU BIDEN CANCER MOONSHOT	93.353	VUMC111115(Master VUMC90086)	Mayo Clinic Hospital	VUMC111115(Master VUMC90086)		\$420	\$907,422	Research and Development	\$559,144,589
21ST CENTURY CURES ACT - BEAU BIDEN CANCER MOONSHOT	93.353	VUMC128400(U01CA294527)	Vanderbilt University	VUMC128400(U01CA294527)		\$108,218	\$907,422	Research and Development	\$559,144,589
21ST CENTURY CURES ACT - BEAU BIDEN CANCER MOONSHOT	93.353	VUMC132119(U01CA294527)	Vanderbilt University	VUMC132119(U01CA294527)		\$11,051	\$907,422	Research and Development	\$559,144,589
21ST CENTURY CURES ACT - BEAU BIDEN CANCER MOONSHOT	93.353	VUMC135854(U01CA294518)	MD Anderson Cancer Center	VUMC135854(U01CA294518)		\$44,334	\$907,422	Research and Development	\$559,144,589
NURSE EDUCATION, PRACTICE QUALITY AND RETENTION GRANTS	93.359	VUMC126090(T48HPS2038)	Vanderbilt University	VUMC126090(T48HPS2038)		\$27,828	N/A		\$0
NURSING RESEARCH	93.361	5R01NR015079-09				\$105,127	\$337,089	Research and Development	\$559,144,589
NURSING RESEARCH	93.361	5R21NR020857-02				\$215,564	\$337,089	Research and Development	\$559,144,589
NURSING RESEARCH	93.361	VUMC114334(R01NR016941)	Columbia University	VUMC114334(R01NR016941)		\$4,982	\$337,089	Research and Development	\$559,144,589
NURSING RESEARCH	93.361	VUMC129630 (R21NR021063)	University of Arkansas for Medical Sciences	VUMC129630 (R21NR021063)		\$11,416	\$337,089	Research and Development	\$559,144,589
ADVANCED RESEARCH PROJECTS AGENCY FOR HEALTH (ARPA-H)	93.384	D24AC00379-00				\$910,716	\$2,459,709	Research and Development	\$559,144,589
ADVANCED RESEARCH PROJECTS AGENCY FOR HEALTH (ARPA-H)	93.384	VUMC127403(1AY1AX000039)	Vanderbilt University	VUMC127403(1AY1AX000039)		\$487,531	\$2,459,709	Research and Development	\$559,144,589
ADVANCED RESEARCH PROJECTS AGENCY FOR HEALTH (ARPA-H)	93.384	VUMC127740(D24AC00357)	University of Washington	VUMC127740(D24AC00357)		\$274,248	\$2,459,709	Research and Development	\$559,144,589
ADVANCED RESEARCH PROJECTS AGENCY FOR HEALTH (ARPA-H)	93.384	VUMC128801(AY2AX000026)	DNA Hive	VUMC128801(AY2AX000026)		\$298,415	\$2,459,709	Research and Development	\$559,144,589
ADVANCED RESEARCH PROJECTS AGENCY FOR HEALTH (ARPA-H)	93.384	VUMC128807(ARPA-H-SOL-24-101)	VentureWell	VUMC128807(ARPA-H-SOL-24-101)	\$261,873	\$455,592	\$2,459,709	Research and Development	\$559,144,589
ADVANCED RESEARCH PROJECTS AGENCY FOR HEALTH (ARPA-H)	93.384	VUMC130794 (AY1AX000039)	Vanderbilt University	VUMC130794 (AY1AX000039)		\$33,207	\$2,459,709	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	1R01CA293996-01			\$38,484	\$212,735	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	3K00CA253718-06S1				\$101,311	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5P01CA116087-16				(\$105,737)	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R01CA077955-25				(\$28)	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R01CA202981-05				\$54,424	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R01CA225005-06			\$95,364	\$10,451	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R01CA230352-05			\$2,621	\$123,157	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R01CA232516-05				\$33,731	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R01CA235553-06				\$680,218	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R01CA237895-06				\$433,932	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R01CA240093-05			\$34,931	\$258,327	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R01CA247987-05			\$92,426	\$513,242	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R01CA249863-05			\$115,229	\$563,120	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R01CA251758-05			\$209,027	\$621,853	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R01CA269589-03			\$75,957	\$478,882	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R01CA275082-04			\$358,725	\$602,294	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R01CA275864-02				\$510,820	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R01CA276266-02			\$182,347	\$551,713	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R37CA227130-06			\$2,022	\$117,449	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R37CA237452-04			(\$11)	\$58,701	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R37CA237452-06			\$49,919	\$344,358	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5R37CA273318-03			\$10,841	\$540,986	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5U01CA202979-09			\$40,788	\$1,720,991	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5U01CA232629-05			\$282,792	\$923,923	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5U01CA262678-04			\$52,703	\$745,991	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5UG3CA260318-02				(\$1,266)	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5UH3CA260318-04				\$1,582,136	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	5UH3CA265846-04			\$334,700	\$2,566,504	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC103470(U01CA167552)	Harvard School of Public Health	VUMC103470(U01CA167552)		\$0	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC105693(R01CA132829)	Dana Farber Cancer Institute	VUMC105693(R01CA132829)		\$4,472	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC106123(R01CA262540)	University of California-San Francisco	VUMC106123(R01CA262540)		\$79,235	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC107991(R01CA267842)	Duke University	VUMC107991(R01CA267842)		\$35,617	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC108715(R03CA270473)	University of Utah	VUMC108715(R03CA270473)		\$2,215	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC109571(U01CA272452)	Brigham and Women's Hospital	VUMC109571(U01CA272452)		\$14,329	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC109694	Memorial Sloan-Kettering Cancer Center	VUMC109694		\$27,792	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC110000(R01CA269223)	Washington State University	VUMC110000(R01CA269223)		\$3,779	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC110335(R01CA263770)	Duke University	VUMC110335(R01CA263770)		\$175,025	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC112490(R03CA273625)	University of Florida	VUMC112490(R03CA273625)		\$54,292	\$16,291,820	Research and Development	\$559,144,589

VANDERBILT UNIVERSITY MEDICAL CENTER
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Fiscal Period 7/1/2024 - 6/30/2025

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CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC116000(R01CA269832-01A1)	Ohio State University	VUMC116000(R01CA269832-01A1)		\$138,454	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC119092(U01CA288325)	University of Texas Health Sciences Center at Houston	VUMC119092(U01CA288325)		\$114,593	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC119263(R37CA275914)	Massachusetts General Hospital	VUMC119263(R37CA275914)		\$142,525	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC122940 (U01CA287008)	Lifespan Rhode Island Hospital	VUMC122940 (U01CA287008)		\$221,707	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC124991(R01CA286064)	Boston University	VUMC124991(R01CA286064)		\$23,098	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC125056(U01CA289226)	International Agency for Research Cancer	VUMC125056(U01CA289226)		\$23,506	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC125425(U01CA284379)	University of Hawaii	VUMC125425(U01CA284379)		\$48,317	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC128343(5R01CA272198-02)	Fred Hutchinson Cancer Center	VUMC128343(5R01CA272198-02)		\$19,939	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC128452(R01CA292900)	Dana Farber Cancer Institute	VUMC128452(R01CA292900)		\$20,900	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC128770(R37CA272473)	Mayo Clinic Hospital	VUMC128770(R37CA272473)		\$11,288	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC129310(R37CA283041)	Memorial Sloan-Kettering Cancer Center	VUMC129310(R37CA283041)		\$20,801	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC130225(P01CA281850)	Harvard University	VUMC130225(P01CA281850)		\$18,628	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC130232(P01CA281850)	Harvard University	VUMC130232(P01CA281850)		\$49,548	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC130562(5R01CA248103)	Nationwide Children's Hospital	VUMC130562(5R01CA248103)		\$28,170	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC130586 (U01CA294674)	Tulane University	VUMC130586 (U01CA294674)		\$8,063	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC131245(R37CA262299)	Yale University	VUMC131245(R37CA262299)		\$50,440	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC133461(U01CA259208)	Yale University	VUMC133461(U01CA259208)		\$8,896	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC133894(R37CA265967)	University of Texas, Southwestern Med Center	VUMC133894(R37CA265967)		\$53,608	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC57069(R01CA157823)	Trustees of Indiana University	VUMC57069(R01CA157823)		\$2,087	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC59925(R01CA200709)	Vanderbilt University	VUMC59925(R01CA200709)		\$28,614	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC68955(U01CA224276)	Vanderbilt University	VUMC68955(U01CA224276)		\$6,797	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC71348(U19CA203654)	International Agency for Research Cancer	VUMC71348(U19CA203654)		\$14	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC71348(U19CA203654)	International Agency for Research Cancer	VUMC71348(U19CA203654)		\$78,130	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC73409(R01CA228156)	Roswell Park Cancer Institute	VUMC73409(R01CA228156)		\$177,562	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC84234(R01CA247833)	Vanderbilt University	VUMC84234(R01CA247833)		\$159,859	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC84363(R37CA246175)	Washington University	VUMC84363(R37CA246175)		\$14,482	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC85652(R00CA230205)	Memorial Sloan-Kettering Cancer Center	VUMC85652(R00CA230205)		\$26,263	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC86785(U24CA248010)	Boston Childrens Hospital	VUMC86785(U24CA248010)		\$21,386	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC86836(U01CA242740)	COM Affiliation, Inc. (Albert Einstein College of Medicine managed by Montefiore)	VUMC86836(U01CA242740)		(\$561)	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC87995(R01CA251112)	The Hospital for Sick Children	VUMC87995(R01CA251112)		\$416	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC88401(R01CA226086)	Medical University of South Carolina	VUMC88401(R01CA226086)		\$3,792	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC91147(OT2HL156812)	Massachusetts General Hospital	VUMC91147(OT2HL156812)		\$38,804	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC91535(U01CA250476)	Brigham and Women's Hospital	VUMC91535(U01CA250476)		\$22,542	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC94447(R01CA255016)	Oregon Health & Science University	VUMC94447(R01CA255016)		\$20,435	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC95543(R01CA255318)	University of Wisconsin Madison	VUMC95543(R01CA255318)		\$36,423	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC97398(R01CA260615)	University of California	VUMC97398(R01CA260615)		\$2,595	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC97443(UG1CA189955)(Master VUMC 90086)	Public Health Institute	VUMC97443(UG1CA189955)(Master VUMC 90086)		\$1,213	\$16,291,820	Research and Development	\$559,144,589
CANCER CAUSE AND PREVENTION RESEARCH	93.393	VUMC99724(R01CA262393)	Mayo Clinic Hospital	VUMC99724(R01CA262393)		\$7,512	\$16,291,820	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	1R01CA289528-01A1				\$295,852	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	1R21CA274545-01 (Yr 2)				\$109,204	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	1R21CA300943-01				\$30,147	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	1U01CA292550-01			\$166,729	\$373,612	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	5D43CA270474-03			\$174,052	\$276,824	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	5R01CA214494-06				\$197,744	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	5R01CA227133-05			(\$13,602)	\$81,320	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	5R01CA250506-05				\$9,318	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	5R01CA252964-05				\$636,565	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	5R01CA253923-05			\$172,619	\$582,445	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	5R01CA264508-03			\$310,647	\$713,560	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	5R01CA266233-04				(\$18,461)	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	5R01CA269620-03				\$527,268	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	5R01CA279249-02				\$491,197	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	5R21CA270731-02				\$120,857	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	5R21CA274426-02				\$56,646	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	5U01CA152662-13			\$175,142	\$806,606	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	5UM1CA183727-11				(\$28,163)	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	5UM1CA183727-13				\$1,615,631	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	VUMC105623(UH3CA271377)	Cedars-Sinai Medical Center	VUMC105623(UH3CA271377)		(\$23,915)	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	VUMC107369(U24CA265879)	Lifespan Rhode Island Hospital	VUMC107369(U24CA265879)		\$52,840	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	VUMC111245(U2CCA271854)	University of Michigan	VUMC111245(U2CCA271854)		\$225,985	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	VUMC117498(R01CA273035-02)	Stanford University	VUMC117498(R01CA273035-02)		\$54,128	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	VUMC118251(R01CA275015)	Boston University	VUMC118251(R01CA275015)		\$212,427	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	VUMC124783(R01CA281043)	Case Western Reserve University	VUMC124783(R01CA281043)		\$21,057	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	VUMC128592(U24CA086368)	University of Michigan	VUMC128592(U24CA086368)		\$103	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	VUMC133799(R37CA288396)	Arizona State University	VUMC133799(R37CA288396)		\$4,231	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	VUMC65127(R01CA212147)	Vanderbilt University	VUMC65127(R01CA212147)		(\$7,216)	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	VUMC77915(5UG3CA232820)	University of Alabama-Birmingham	VUMC77915(5UG3CA232820)		\$80,152	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	VUMC79583(R01CA159036)	New York University School of Medicine	VUMC79583(R01CA159036)		(\$287)	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	VUMC88214(U54CA260560)	Icahn School of Medicine at Mount Sinai	VUMC88214(U54CA260560)		\$175,132	\$8,018,475	Research and Development	\$559,144,589
CANCER DETECTION AND DIAGNOSIS RESEARCH	93.394	VUMC90083(R01CA245134)	Vanderbilt University	VUMC90083(R01CA245134)		\$13,075	\$8,018,475	Research and Development	\$559,144,589
CANCER TREATMENT RESEARCH	93.395	1R03CA292953-01				\$45,388	\$5,733,779	Research and Development	\$559,144,589
CANCER TREATMENT RESEARCH	93.395	1R50CA285499-01A1				\$107,952	\$5,733,779	Research and Development	\$559,144,589
CANCER TREATMENT RESEARCH	93.395	3UG1CA233270-06				\$445,524	\$5,733,779	Research and Development	\$559,144,589
CANCER TREATMENT RESEARCH	93.395	5R01CA213201-05				\$14,785	\$5,733,779	Research and Development	\$559,144,589
CANCER TREATMENT RESEARCH	93.395	5R01CA227481-05				\$43,021	\$5,733,779	Research and Development	\$559,144,589
CANCER TREATMENT RESEARCH	93.395	5R01CA248505-05			\$28,570	\$396,174	\$5,733,779	Research and Development	\$559,144,589
CANCER TREATMENT RESEARCH	93.395	5R01CA262287-04			\$181,993	\$757,515	\$5,733,779	Research and Development	\$559,144,589
CANCER TREATMENT RESEARCH	93.395	5R01CA269217-03				\$378,531	\$5,733,779	Research and Development	\$559,144,589
CANCER TREATMENT RESEARCH	93.395	5R01CA273246-02			\$175,804	\$360,945	\$5,733,779	Research and Development	\$559,144,589
CANCER TREATMENT RESEARCH	93.395	5R01CA276352-02				\$891,361	\$5,733,779	Research and Development	\$559,144,589
CANCER TREATMENT RESEARCH	93.395	5R37CA276936-02				\$36,094	\$507,695	Research and Development	\$559,144,589
CANCER TREATMENT RESEARCH	93.395	5U01CA253560-04			\$129,970	\$188,102	\$5,733,779	Research and Development	\$559,144,589
CANCER TREATMENT RESEARCH	93.395	UM1 CA186689	Yale University	UM1 CA186689		\$2,133	\$5,733,779	Research and Development	\$559,144,589

VANDERBILT UNIVERSITY MEDICAL CENTER
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Fiscal Period 7/1/2024 - 6/30/2025

Federal Awarding Agency/Program Title	Assistance Listing Number	Additional Award Identification (Optional)	Name of Funder Pass-Through Entity	Identifying Number Assigned By Funder Pass-Through Entity	Total Amount Provided to Sub-Recipients	Federal Expenditures	Federal Program Total	Cluster Name	Cluster Total
CANCER TREATMENT RESEARCH	93.395	VUMC	Yale University	VUMC		(\$13,793)	\$5,733,779	Research and Development	\$559,144,589
CANCER TREATMENT RESEARCH	93.395	VUMC00000 (??????)(Protocol S2001)	Southwest Oncology Group	VUMC00000 (??????)(Protocol S2001)	\$5,262	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC104107(5U01CA253166-06)	Fred Hutchinson Cancer Center	VUMC104107(5U01CA253166-06)	\$96,035	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC105266(R01CA258751)	University of Kentucky	VUMC105266(R01CA258751)	(\$14,519)	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC105475(R01CA274675)	Vanderbilt University	VUMC105475(R01CA274675)	\$9,133	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC107778(U10CA180888)	Oregon Health & Science University	VUMC107778(U10CA180888)	\$225,597	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC113568(U01CA180820)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC113568(U01CA180820)	\$14,717	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC114179(U10CA180886)	Public Health Institute	VUMC114179(U10CA180886)	\$21,529	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC116706(R00CA248822)	University of Virginia-Charlottesville	VUMC116706(R00CA248822)	\$76,911	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC116978(R01CA266767)	Vanderbilt University	VUMC116978(R01CA266767)	\$9,666	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC122910(5U10CA180821-11)	Brigham and Women's Hospital	VUMC122910(5U10CA180821-11)	\$120,886	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC123089(R01CA281153)	University of Florida	VUMC123089(R01CA281153)	\$22,122	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC35634(P01CA129243)	Memorial Sloan-Kettering Cancer Center	VUMC35634(P01CA129243)	\$1,788	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC44233(UM1CA186689)	Yale University	VUMC44233(UM1CA186689)	\$197,131	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50102(U10CA180820)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50102(U10CA180820)	\$10,555	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol A011801)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol A011801)	\$8,177	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol A022101)	Alliance for Clinical Trials in Oncology Foundation	VUMC50421(UG1CA189828)(Protocol A022101)	\$1,297	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol A022104)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol A022104)	\$13,062	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol BRE A011401)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol BRE A011401)	\$60,005	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol EA1181)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol EA1181)	\$52	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol EA2176)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol EA2176)	\$16,922	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol EA2182)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol EA2182)	\$10,839	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol EA2185)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol EA2185)	\$123	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol EA2197)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol EA2197)	\$4,757	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol EA2201)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol EA2201)	\$2,040	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol EA2222)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol EA2222)	\$266	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol EA3161)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol EA3161)	\$260	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol EA9181)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol EA9181)	\$2,794	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol NRG-HN006)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol NRG-HN006)	\$10,702	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol PHIII MK3475)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol PHIII MK3475)	\$68	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol S2012)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol S2012)	\$2,588	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol S2107)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol S2107)	\$4,206	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol THO EA5163)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol THO EA5163)	(\$67)	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol URO S1806)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol URO S1806)	(\$426)	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol UROS1802)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol UROS1802)	\$2,498	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC50421(UG1CA189828)(Protocol GIEA2174)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC50421(UG1CA189828)(Protocol GIEA2174)	\$7,977	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC57366(U01CA180868)(Protocol NRG-GI008)	NRG Oncology Foundation	VUMC57366(U01CA180868)(Protocol NRG-GI008)	\$183	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC57366(U10CA180868)(Protocol NRG-CC008)	NRG Oncology Foundation	VUMC57366(U10CA180868)(Protocol NRG-CC008)	\$42	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC61739	NRG Oncology Foundation	VUMC61739	\$4,585	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC74949(UG1CA233259)	Emory University	VUMC74949(UG1CA233259)	\$47,024	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC75433(U10CA180820)	ECOG-ACRIN - Eastern Cooperative Oncology Group	VUMC75433(U10CA180820)	\$20,826	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC79147(75N93019C00062)	Washington University	VUMC79147(75N93019C00062)	\$60,353	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC80121(R01CA243326)	Vanderbilt University	VUMC80121(R01CA243326)	(\$8)	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC83991(R01CA116021)	Vanderbilt University	VUMC83991(R01CA116021)	\$24,158	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC86613(R01CA243511)	Washington University	VUMC86613(R01CA243511)	\$41,300	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC94398(U10CA180886)	Public Health Institute	VUMC94398(U10CA180886)	\$39,987	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC94713(U10CA180886)(Master VUMC90086)(PO 04851)	Public Health Institute	VUMC94713(U10CA180886)(Master VUMC90086)(PO 04851)	\$14,918	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC94716(U10CA180886)(Master VUMC90086)	Public Health Institute	VUMC94716(U10CA180886)(Master VUMC90086)	\$61,421	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC95146(R37CA245157)	University of Alabama-Birmingham	VUMC95146(R37CA245157)	\$305,725	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC95223(R01CA260958)	Vanderbilt University	VUMC95223(R01CA260958)	\$40,614	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC99281(UM1CA228823)(VUMC90086 Master)	Public Health Institute	VUMC99281(UM1CA228823)(VUMC90086 Master)	\$2,166	\$5,733,779	Research and Development	\$559,144,589	
CANCER TREATMENT RESEARCH	93.395	VUMC99284(UM1CA228823)(Master VUMC90086)	Public Health Institute	VUMC99284(UM1CA228823)(Master VUMC90086)	\$199	\$5,733,779	Research and Development	\$559,144,589	
CANCER BIOLOGY RESEARCH	93.396	2R35CA197570-08			\$15,058	\$976,583	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	3R01CA227833-05S1			\$107,467	\$231,251	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	3R01CA272875-03S1			\$22,727	\$530,116	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	5P01CA116087-18			\$192,086	\$1,669,149	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	5R01CA077955-29				\$527,662	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	5R01CA211695-07				\$36,372	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	5R01CA217987-05				\$522	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	5R01CA217987-08			\$3,664	\$262,224	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	5R01CA235016-05			\$2,302	\$55,754	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	5R01CA249424-06			\$243,103	\$496,438	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	5R01CA250051-05				\$404,316	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	5R01CA271176-03				\$445,542	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	5R01CA272687-03			\$53,820	\$1,067,806	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	5R01CA278642-03				\$339,276	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	5R01CA281732-03					\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	5R01CA285780-02			\$396,940	\$700,351	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	5R01CA285780-02			\$18,101	\$503,724	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	5R35CA197570-07				(\$118,601)	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	5R37CA244970-05				\$271,092	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	5R37CA263614-04				\$678,528	\$9,409,575	Research and Development	\$559,144,589
CANCER BIOLOGY RESEARCH	93.396	VUMC105433(U01CA272541)	University of Tennessee Health Sciences Center	VUMC105433(U01CA272541)	\$107,793	\$9,409,575	Research and Development	\$559,144,589	
CANCER BIOLOGY RESEARCH	93.396	VUMC107841(P01CA268991)	University of Miami	VUMC107841(P01CA268991)	\$18,254	\$9,409,575	Research and Development	\$559,144,589	
CANCER BIOLOGY RESEARCH	93.396	VUMC129442(2R01CA226833-06A1)	Vanderbilt University	VUMC129442(2R01CA226833-06A1)	\$352	\$9,409,575	Research and Development	\$559,144,589	
CANCER BIOLOGY RESEARCH	93.396	VUMC131483(R01CA256054)	William Marsh Rice University	VUMC131483(R01CA256054)	\$29,488	\$9,409,575	Research and Development	\$559,144,589	
CANCER BIOLOGY RESEARCH	93.396	VUMC71859(U01CA233581)	University of Alabama-Birmingham	VUMC71859(U01CA233581)	(\$700)	\$9,409,575	Research and Development	\$559,144,589	
CANCER BIOLOGY RESEARCH	93.396	VUMC77299(R01CA226833)	Vanderbilt University	VUMC77299(R01CA226833)	(\$3,119)	\$9,409,575	Research and Development	\$559,144,589	
CANCER BIOLOGY RESEARCH	93.396	VUMC82497(P01CA229123)	Vanderbilt University	VUMC82497(P01CA229123)	\$151,907	\$9,409,575	Research and Development	\$559,144,589	
CANCER BIOLOGY RESEARCH	93.396	VUMC94704(R01CA255446)	Vanderbilt University	VUMC94704(R01CA255446)	\$27,495	\$9,409,575	Research and Development	\$559,144,589	
CANCER CENTERS SUPPORT GRANTS	93.397	3P30CA068485-29S2			\$1,567,699	\$7,582,075	\$13,520,151	Research and Development	\$559,144,589
CANCER CENTERS SUPPORT GRANTS	93.397	3P50CA098131-21S2			\$67,653	\$1,041,204	\$13,520,151	Research and Development	\$559,144,589
CANCER CENTERS SUPPORT GRANTS	93.397	3P50CA236733-05S2			\$433,644	\$1,063,453	\$13,520,151	Research and Development	\$559,144,589
CANCER CENTERS SUPPORT GRANTS	93.397	3U54CA163072-15S1			\$238,441	\$1,578,235	\$13,520,151	Research and Development	\$559,144,589
CANCER CENTERS SUPPORT GRANTS	93.397	5U54CA274367-03			\$605,865	\$2,220,748	\$13,520,151	Research and Development	\$559,144,589

VANDERBILT UNIVERSITY MEDICAL CENTER
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Fiscal Period 7/1/2024 - 6/30/2025

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CANCER CENTERS SUPPORT GRANTS	93.397	VUMC117725(U54CA277834)	H. Lee Moffitt Cancer Center and Research Institute	VUMC117725(U54CA277834)		\$16,106	\$13,520,151	Research and Development	\$559,144,589
CANCER CENTERS SUPPORT GRANTS	93.397	VUMC120140(U54CA277834)	H. Lee Moffitt Cancer Center and Research Institute	VUMC120140(U54CA277834)		\$18,330	\$13,520,151	Research and Development	\$559,144,589
CANCER RESEARCH MANPOWER	93.398	1K08CA293255-01				\$134,842	\$2,679,969	Research and Development	\$559,144,589
CANCER RESEARCH MANPOWER	93.398	5K07CA225404-05				\$4,437	\$2,679,969	Research and Development	\$559,144,589
CANCER RESEARCH MANPOWER	93.398	5K08CA240901-05				\$178,413	\$2,679,969	Research and Development	\$559,144,589
CANCER RESEARCH MANPOWER	93.398	5K08CA241351-05				\$132,830	\$2,679,969	Research and Development	\$559,144,589
CANCER RESEARCH MANPOWER	93.398	5K12CA090625-25				\$853,957	\$2,679,969	Research and Development	\$559,144,589
CANCER RESEARCH MANPOWER	93.398	5R00CA215360-06				\$197,492	\$2,679,969	Research and Development	\$559,144,589
CANCER RESEARCH MANPOWER	93.398	5T32CA106183-21				\$361,918	\$2,679,969	Research and Development	\$559,144,589
CANCER RESEARCH MANPOWER	93.398	5T32CA160056-11				(\$4,447)	\$2,679,969	Research and Development	\$559,144,589
CANCER RESEARCH MANPOWER	93.398	5T32CA160056-14				\$440,614	\$2,679,969	Research and Development	\$559,144,589
CANCER RESEARCH MANPOWER	93.398	5T32CA217834-07				\$351,566	\$2,679,969	Research and Development	\$559,144,589
CANCER RESEARCH MANPOWER	93.398	7K01CA237748-05				(\$2)	\$2,679,969	Research and Development	\$559,144,589
CANCER RESEARCH MANPOWER	93.398	VUMC113419 (T32CA009582)	Vanderbilt University	VUMC113419 (T32CA009582)		\$16,618	\$2,679,969	Research and Development	\$559,144,589
CANCER RESEARCH MANPOWER	93.398	VUMC115194 (T32CA009592)	Vanderbilt University	VUMC115194 (T32CA009592)		\$5,657	\$2,679,969	Research and Development	\$559,144,589
CANCER RESEARCH MANPOWER	93.398	VUMC68198(T32CA009582)	Vanderbilt University	VUMC68198(T32CA009582)		\$6,074	\$2,679,969	Research and Development	\$559,144,589
CANCER CONTROL	93.399	VUMC50421(A021901)	Alliance for Clinical Trials in Oncology Foundation	VUMC50421(A021901)		\$5,737	\$83,925	Research and Development	\$559,144,589
CANCER CONTROL	93.399	VUMC50421(A032103)	Alliance for Clinical Trials in Oncology Foundation	VUMC50421(A032103)		\$5,456	\$83,925	Research and Development	\$559,144,589
CANCER CONTROL	93.399	VUMC50421(EAY1919-A3)	Alliance for Clinical Trials in Oncology Foundation	VUMC50421(EAY1919-A3)		\$7,150	\$83,925	Research and Development	\$559,144,589
CANCER CONTROL	93.399	VUMC87035(UG1CA189824)	Wake Forest University Health Sciences	VUMC87035(UG1CA189824)		\$37,633	\$83,925	Research and Development	\$559,144,589
CANCER CONTROL	93.399	VUMC97849(UG1CA189955)(Master VUMC90086)	Public Health Institute	VUMC97849(UG1CA189955)(Master VUMC90086)		\$27,949	\$83,925	Research and Development	\$559,144,589
ACL NATIONAL INSTITUTE ON DISABILITY, INDEPENDENT LIVING, AND REHABILITATION RESEARCH	93.433	VUMC127608(90DPTB0027)	The Spaulding Rehabilitation Hospital Corporation	VUMC127608(90DPTB0027)		\$19,249	\$19,249	Research and Development	\$559,144,589
ALZHEIMERS DISEASE PROGRAM INITIATIVE (ADPI)	93.470	VUMC75498(31602-20031)(Edison ID 65462)	State of Tennessee	VUMC75498(31602-20031)(Edison ID 65462)		\$4,699	\$4,699	Research and Development	\$559,144,589
PREVENTING MATERNAL DEATHS: SUPPORTING MATERNAL MORTALITY REVIEW COMMITTEES	93.478	VUMC78227(Edison ID 72869)	Tennessee Department of Health Services	VUMC78227(Edison ID 72869)		\$97,725	\$97,725	N/A	\$0
TEMPORARY ASSISTANCE FOR NEEDY FAMILIES	93.558	VUMC104246	Hamilton County Coalition	VUMC104246		\$2,767	(\$1,232)	477 Cluster	(\$1,232)
TEMPORARY ASSISTANCE FOR NEEDY FAMILIES	93.558	VUMC91900(Edison ID 74781)	TN Dept of Mental Health and Substance Abuse Services (Changed 2012)	VUMC91900(Edison ID 74781)		(\$3,999)	(\$1,232)	477 Cluster	(\$1,232)
CHILD CARE AND DEVELOPMENT BLOCK GRANT	93.575	VUMC104101 (2101TNCSC6)				(\$54,206)	(\$54,206)	CCDF Cluster	(\$54,206)
DEVELOPMENTAL DISABILITIES BASIC SUPPORT AND ADVOCACY GRANTS	93.630	VUMC114348(Edison ID 82934)	Tennessee Council on Developmental Disabilities	VUMC114348(Edison ID 82934)		\$20,567	\$45,611	N/A	\$0
DEVELOPMENTAL DISABILITIES BASIC SUPPORT AND ADVOCACY GRANTS	93.630	VUMC39643 (Edison ID 87319)	Tennessee Council on Developmental Disabilities	VUMC39643 (Edison ID 87319)		\$25,044	\$45,611	N/A	\$0
UNIVERSITY CENTERS FOR EXCELLENCE IN DEVELOPMENTAL DISABILITIES EDUCATION, RESEARCH, AND SERVICE	93.632	90DDUC0077-04-01			\$35,696	\$70,359	\$659,191	N/A	\$0
UNIVERSITY CENTERS FOR EXCELLENCE IN DEVELOPMENTAL DISABILITIES EDUCATION, RESEARCH, AND SERVICE	93.632	90DDUC0077-05-01			\$90,647	\$563,247	\$659,191	N/A	\$0
UNIVERSITY CENTERS FOR EXCELLENCE IN DEVELOPMENTAL DISABILITIES EDUCATION, RESEARCH, AND SERVICE	93.632	90UCPH056-01-00				\$25,585	\$659,191	N/A	\$0
MATERNAL OPIOID MISUSE MODEL	93.687	VUMC79773(Edison ID 65326)			\$2,411	\$320,732	\$320,732	N/A	\$0
MEDICAL ASSISTANCE PROGRAM	93.778	VUMC04952(Edison ID 71331)	State of Tennessee - Bureau of TennCare	VUMC04952(Edison ID 71331)		\$750,384	\$2,508,783	MEDICAID CLUSTER	\$2,508,783
MEDICAL ASSISTANCE PROGRAM	93.778	VUMC132437(Edison ID 85865)	State of Tennessee	VUMC132437(Edison ID 85865)		\$36,364	\$2,508,783	MEDICAID CLUSTER	\$2,508,783
MEDICAL ASSISTANCE PROGRAM	93.778	VUMC32655(35910-02279)	TN Dept of Mental Health and Substance Abuse Services (Changed 2012)	VUMC32655(35910-02279)		(\$106)	\$2,508,783	MEDICAID CLUSTER	\$2,508,783
MEDICAL ASSISTANCE PROGRAM	93.778	VUMC34741(34347-37124)(EDISON ID 78815)	Tennessee Department of Health Services	VUMC34741(34347-37124)(EDISON ID 78815)	\$135,051	\$563,590	\$2,508,783	MEDICAID CLUSTER	\$2,508,783
MEDICAL ASSISTANCE PROGRAM	93.778	VUMC79162	BlueCross/BlueShield of Tennessee	VUMC79162	\$43,509	\$1,158,551	\$2,508,783	MEDICAID CLUSTER	\$2,508,783
OPIOID STR	93.788	VUMC76661(DGA 78005_2022-2023_056)	TN Dept of Mental Health and Substance Abuse Services (Changed 2012)	VUMC76661(DGA 78005_2022-2023_056)		\$160,417	\$1,321,742	N/A	\$0
OPIOID STR	93.788	VUMC89917(A DGA 78005_2022-2025_062)	TN Dept of Mental Health and Substance Abuse Services (Changed 2012)	VUMC89917(A DGA 78005_2022-2025_062)		\$1,161,325	\$1,321,742	N/A	\$0
CARDIOVASCULAR DISEASES RESEARCH	93.837	1DP2HL152426-01 (Yr 4)				(\$1,529)	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	1R01HL170020-01A1				\$388,185	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	1R01HL171809-01				\$474,477	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	1R01HL174052-01A1			\$5,420	\$487,068	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	1R01HL174961-01A1				\$41,624	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	1T32HL170965-01				\$189,217	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	2R01HL148244-06				\$397,252	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5F32HL165917-02				(\$36,294)	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5K01HL145345-04				\$67,713	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5K01HL165020-03				\$138,728	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5K08HL153786-05				\$116,118	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5K08HL153956-03				(\$2,907)	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5K23HL148640-05				\$150,902	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5K23HL151871-05				\$164,741	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5K23HL156759-04				\$154,644	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5K23HL159351-02				\$190,794	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5K23HL166960-02				\$157,237	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5K24HL165163-03				\$126,356	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5K99HL171847-02				\$191,977	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5P01HL116263-10			\$380,612	\$2,310,008	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R00HL153939-04				\$237,658	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL094786-11			\$197,370	\$593,502	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL131977-05				\$803	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL140145-04				\$3,871	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL142302-06			\$536,327	\$824,306	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL142583-04				\$3,479	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL142856-05				\$106,325	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL144568-05				\$294,372	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL144846-04				(\$7)	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL144846-06				\$610,594	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL144941-05				\$682,596	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL144943-04				\$0	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL145721-05				\$139,360	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL146654-04				(\$330)	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL148244-05				\$33,611	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL148661-04			\$31,084	\$446,311	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL149386-05				\$288,177	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL149779-04			\$16,468	\$692,869	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL149826-04				\$25,613	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL149948-04			\$212,379	\$405,692	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL151523-04				\$209,041	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL153607-04			\$101,653	\$663,974	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL155197-04				\$1,168,573	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL155523-04				\$118,513	\$38,478,714	Research and Development	\$559,144,589

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CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL156021-05			\$316,350	\$839,509	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL157378-04			\$2,487	\$137,121	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL157583-04			\$1,524	\$28,641	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL157584-04				\$712,820	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL158884-04			\$205,556	\$396,051	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL158976-04			\$517,873	\$981,165	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL159203-04				\$618,103	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL159487-05			\$58,316	\$494,797	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL160863-04				\$745,168	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL160970-04			\$80,122	\$650,695	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL160975-04				\$771,651	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL161095-04				\$1,114,420	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL161516-04			\$79,225	\$657,064	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL163854-09			\$46,229	\$674,853	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL164327-04				\$843,495	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL164526-03			\$86,701	\$708,323	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL164675-04			\$1,170,344	\$2,114,583	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL164820-02				\$288,217	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL164909-03				\$542,101	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL164995-04				\$998,813	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL167110-02			\$572,743	\$883,829	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL167509-02			\$168,728	\$645,988	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL167969-02			\$250,079	\$562,908	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL169859-02			\$115,387	\$516,040	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL171122-02				\$452,682	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL173523-02			\$52,533	\$239,226	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R01HL173766-02				\$538,421	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R21HL169186-02				\$158,636	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R21HL172038-02				\$242,229	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R33HL155810-04			\$168,223	\$748,673	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R34HL155400-03				\$1,899	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R35HL140016-07			\$54,491	\$471,738	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R35HL144980-07			\$44,395	\$1,387,882	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	5R38HL167237-03				\$191,315	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC104681(R01HL155209)	University of Minnesota	VUMC104681(R01HL155209)		\$52,416	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC104942(R01HL159401)	University of Rochester	VUMC104942(R01HL159401)		\$5,890	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC104959(R01HL151152)	Fred Hutchinson Cancer Center	VUMC104959(R01HL151152)		\$39,876	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC105632(R01HL157247)	University of California-San Francisco	VUMC105632(R01HL157247)		\$11,147	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC106924(R01HL156990)	University of California-San Francisco	VUMC106924(R01HL156990)		\$176,832	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC109527(R01HL151838)	University of California-San Francisco	VUMC109527(R01HL151838)		\$58,680	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC110315(R01HL155396)	Duke University	VUMC110315(R01HL155396)		\$16,442	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC110551(R44HL140669)	Volumetrix LLC	VUMC110551(R44HL140669)		\$87,809	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC110664(R01HL145293)	Yale University	VUMC110664(R01HL145293)		\$259,530	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC110903(UG3HL164285)	Massachusetts General Hospital	VUMC110903(UG3HL164285)		\$349	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC112272(R01HL163262)	University of North Carolina-Chapel Hill	VUMC112272(R01HL163262)		(\$132,290)	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC112781(R01HL131029)	Boston University	VUMC112781(R01HL131029)		\$155,457	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC114281(R44HL147787)	Sigt, LLC	VUMC114281(R44HL147787)		\$44,537	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC117083(UG3HL166794-02)	Nationwide Children's Hospital	VUMC117083(UG3HL166794-02)		\$123	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC117102(P01HL128203)	University of Cincinnati	VUMC117102(P01HL128203)		\$471,598	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC117170(T32HL144446-05)	Vanderbilt University	VUMC117170(T32HL144446-05)		\$23,095	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC117963(R01HL166305)	University of Texas, Southwestern Med Center	VUMC117963(R01HL166305)	\$14,934	\$12,002	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC117963(R01HL166305)	University of Texas, Southwestern Med Center	VUMC117963(R01HL166305)		\$151,875	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC118519(R01HL159401)	University of Rochester	VUMC118519(R01HL159401)		\$18,387	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC118921(R43HL170906)	Sigt, LLC	VUMC118921(R43HL170906)		\$40,786	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC118994(R01HL149680)	Columbia University	VUMC118994(R01HL149680)		\$6,463	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC120543	Vanderbilt University	VUMC120543		\$19,023	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC120551(R01HL171403)	Stanford University	VUMC120551(R01HL171403)		\$63,973	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC120776(R01HL166169)	University of Florida	VUMC120776(R01HL166169)		\$52,637	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC120806(R01HL170546)	Vanderbilt University	VUMC120806(R01HL170546)		\$60,668	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC122422(R01HL173157)	New York University School of Medicine	VUMC122422(R01HL173157)		\$46,658	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC124703(R01HL167986)	Northwestern University	VUMC124703(R01HL167986)		\$34,393	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC124926(R01HL170140)	Pennsylvania State University	VUMC124926(R01HL170140)		\$311,694	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC126137 (R01HL159204)	Miriam Hospital	VUMC126137 (R01HL159204)		\$6,470	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC126711(R01HL175323)	University of Mississippi Medical Center	VUMC126711(R01HL175323)		\$61,125	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC126877(R01HL149516)	University of California Los Angeles	VUMC126877(R01HL149516)		\$13,780	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC127806(R01HL170600)	University of California Los Angeles	VUMC127806(R01HL170600)		\$233,668	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC128029(1R01HL168695-01)	Michigan State Univ	VUMC128029(1R01HL168695-01)		\$12,877	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC131110(R01HL171506)	Vanderbilt University	VUMC131110(R01HL171506)		\$8,964	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC133744(R01HL176571)	Duke University	VUMC133744(R01HL176571)		\$1,041	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC134991(R01HL173248)	INOVA	VUMC134991(R01HL173248)		\$1,124	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC62109(U10HL068270)	New England Research Institute	VUMC62109(U10HL068270)		\$0	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC71707(R01HL139968)	University at Buffalo	VUMC71707(R01HL139968)		\$0	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC74843(R01HL147818)	University of Pittsburgh	VUMC74843(R01HL147818)		(\$73)	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC76527(R01HL148137)	Harvard School of Public Health	VUMC76527(R01HL148137)		\$1,399	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC81808(R01HL151223)	Vanderbilt University	VUMC81808(R01HL151223)		\$157,276	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC83043(R01HL147171)	University of Cincinnati	VUMC83043(R01HL147171)		(\$910)	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC86626(R01HL151604)	Cincinnati Children's Hospital Medical Center	VUMC86626(R01HL151604)		(\$3,004)	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC87123(R01HL153118)	University of Cincinnati Medical Center	VUMC87123(R01HL153118)		\$964	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC87875(R01HL148439)	Brigham and Women's Hospital	VUMC87875(R01HL148439)		\$21,620	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC89242(U2CHL156291)	Childrens Hospital of Philadelphia	VUMC89242(U2CHL156291)		\$745,733	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC90694(R01HL150053)	University of Minnesota	VUMC90694(R01HL150053)		\$12,227	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC91682(R01HL158071)	Cleveland Clinic Lerner College of Medicine	VUMC91682(R01HL158071)		\$211,550	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC93898(R01HL156991)	Washington University	VUMC93898(R01HL156991)		\$72,856	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC95796(R01HL153179)	University of Minnesota	VUMC95796(R01HL153179)		\$58,852	\$38,478,714	Research and Development	\$559,144,589

VANDERBILT UNIVERSITY MEDICAL CENTER
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Fiscal Period 7/1/2024 - 6/30/2025

Federal Awarding Agency/Program Title	Assistance Listing Number	Additional Award Identification (Optional)	Name of Funder Pass-Through Entity	Identifying Number Assigned By Funder Pass-Through Entity	Total Amount Provided to Sub-Recipients	Federal Expenditures	Federal Program Total	Cluster Name	Cluster Total
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC96446(R01HL151841)	Massachusetts General Hospital	VUMC96446(R01HL151841)		\$34,316	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC96906(R01HL149680)	Columbia University	VUMC96906(R01HL149680)		(\$14,300)	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC97842(R01HL151659)	University of Florida	VUMC97842(R01HL151659)		\$43,736	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC97850(R01HL136685)	University of Michigan	VUMC97850(R01HL136685)		\$9,318	\$38,478,714	Research and Development	\$559,144,589
CARDIOVASCULAR DISEASES RESEARCH	93.837	VUMC97967 (R01HL156034)	Vanderbilt University	VUMC97967 (R01HL156034)		\$83,785	\$38,478,714	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	1K99HL166865-01A1				\$14,546	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	1R01HL171731-01A1				\$279,793	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	1R01HL179065-01				\$85,169	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	1R03HL177130-01				\$7,253	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	1R13HL170685-01				\$8,136	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	1R56HL149129-01A1							
LUNG DISEASES RESEARCH	93.838	1R56HL166941-01			(\$404)	(\$699)	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	1U01HL175444-01			\$176,359	\$158,839	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5K01HL157755-05				\$469,082	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5K01HL161257-03				\$77,969	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5K08HL143051-05				\$142,394	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5K12HL143956-05				\$478	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5K23HL148638-05				(\$16,768)	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5K23HL148638-05				\$80,576	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5K23HL153584-05				\$111,241	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5K24HL155891-04				\$104,027	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5P01HL092870-10				(\$2,355)	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL095797-13				\$0	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL122554-10				\$468,446	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL126176-06				\$420	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL134802-05				\$144,538	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL136664-08				\$551,574	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL142720-04				(\$36)	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL142720-06				\$768,897	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL146401-05				(\$52,974)	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL146588-04			\$231,302	\$265,106	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL150617-04			\$62,062	\$352,422	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL151016-04				\$6,035	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL153246-05			\$115,319	\$341,795	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL155278-03				\$845,420	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL157373-04				\$402,295	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL158906-04				\$396,786	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL160551-04			\$78,207	\$396,786	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL163195-04			\$9,026	\$542,829	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL163960-04			\$16,656	\$695,172	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL163960-04			\$187,285	\$709,414	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL164937-04			\$62,244	\$505,089	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL168556-03			\$206,210	\$883,750	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL171577-02			\$167,664	\$643,914	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R01HL173480-02			\$87,887	\$493,740	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R33HL151951-05				\$814,508	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R33HL158941-03				\$840,350	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R34HL168301-02			\$121,154	\$840,350	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R34HL173389-02			\$34,376	\$335,219	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5R35HL150783-05			\$52,452	\$263,577	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5T32HL087738-19			\$349	\$600,080	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5T32HL094296-14				\$316,320	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5T32HL094296-17				\$15,620	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5T32HL094296-17				\$324,121	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5U01HL163303-03			\$147,388	\$532,430	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5U01HL168412-03			\$140,609	\$348,164	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	5U01HL168478-03			\$1,068,436	\$4,249,625	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	OT2 HL156812	Massachusetts General Hospital	OT2 HL156812		\$401,668	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC100137(K24HL150312)	Icahn School of Medicine at Mount Sinai	VUMC100137(K24HL150312)		\$20,036	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC100527(R01HL142775)	Southern Methodist University	VUMC100527(R01HL142775)		\$1,903	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC102543(R01HL157130)	Dartmouth College	VUMC102543(R01HL157130)		\$302,898	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC105802(Master VUMC67453)(OT2HL156812)	Research Triangle Institute	VUMC105802(Master VUMC67453)(OT2HL156812)	\$2,917,828	\$3,623,086	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC106972(UH3HL147011)	Fred Hutchinson Cancer Center	VUMC106972(UH3HL147011)		\$35,317	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC107606(UG1HL139119)	University of Kansas	VUMC107606(UG1HL139119)		\$0	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC107780(T32HL160508)	University of California-San Francisco	VUMC107780(T32HL160508)		\$48,284	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC109416(U01HL123010)	University of Colorado Anschutz Medical Center	VUMC109416(U01HL123010)		\$900	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC113699(OT2HL156812)	Duke University	VUMC113699(OT2HL156812)		\$2,686	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC114865(U01HL123009)	Massachusetts General Hospital	VUMC114865(U01HL123009)		(\$7,031)	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC115971(R42HL158393)	MTI BioTech	VUMC115971(R42HL158393)		\$647,824	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC118492(OT2HL156812) (Master VUMC110596)	Duke University	VUMC118492(OT2HL156812) (Master VUMC110596)		\$80	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC120071(R01HL172247)	Vanderbilt University	VUMC120071(R01HL172247)		\$14,067	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC123336(OT2HL156812)	Duke University	VUMC123336(OT2HL156812)		\$7,217	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC124020(R01HL169347)	Duke University	VUMC124020(R01HL169347)		\$22,215	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC124659(R01HL172709)	Texas Tech University	VUMC124659(R01HL172709)		\$103,262	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC125549 (R01HL145372)	Translational Genomics Research Institute	VUMC125549 (R01HL145372)		\$414,604	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC125752(R01HL164660)	Cleveland Clinic Foundation	VUMC125752(R01HL164660)		\$21,618	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC131244(P01HL172729)	University of Michigan	VUMC131244(P01HL172729)		\$1,089,557	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC131265(R01HL164570)	Ann & Robert H. Lurie Children's Hospital of Chicago	VUMC131265(R01HL164570)		\$57,678	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC132522 (UG3HL175041)	Cleveland Clinic Lerner College of Medicine	VUMC132522 (UG3HL175041)		\$23,877	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC132569(R01HL168261)	Johns Hopkins	VUMC132569(R01HL168261)		\$44,380	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC134830(R01HL169392)	University of Pennsylvania	VUMC134830(R01HL169392)		\$7,275	\$26,249,512	Research and Development	\$559,144,589

VANDERBILT UNIVERSITY MEDICAL CENTER
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Fiscal Period 7/1/2024 - 6/30/2025

Federal Awarding Agency/Program Title	Assistance Listing Number	Additional Award Identification (Optional)	Name of Funder Pass-Through Entity	Identifying Number Assigned By Funder Pass-Through Entity	Total Amount Provided to Sub-Recipients	Federal Expenditures	Federal Program Total	Cluster Name	Cluster Total
LUNG DISEASES RESEARCH	93.838	VUMC89634(U01HL130045)	Washington University	VUMC89634(U01HL130045)		\$0	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC89846(U01HL152976)	Boston University	VUMC89846(U01HL152976)		\$90,155	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC94285(U24HL145265)	University of Michigan	VUMC94285(U24HL145265)		\$1,548	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC94854(R01HL159250)	Northwestern University	VUMC94854(R01HL159250)		\$14,437	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC95252(U01HL123009)	Massachusetts General Hospital	VUMC95252(U01HL123009)	(\$7,916)	(\$7,916)	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC96886(R01HL155159)	University of Pennsylvania	VUMC96886(R01HL155159)		\$1,951	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC97854(UG3HL151458)	Johns Hopkins University School of Medicine	VUMC97854(UG3HL151458)		\$8,931	\$26,249,512	Research and Development	\$559,144,589
LUNG DISEASES RESEARCH	93.838	VUMC99273(R01HL159886)	University of Pennsylvania	VUMC99273(R01HL159886)		\$8,234	\$26,249,512	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	5K08HL150282-06				\$98,563	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	5K24HL147017-05				\$38,822	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	5R00HL159230-04				\$166,313	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	5R01HL124159-08				(\$354)	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	5R01HL133559-04				\$6,387	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	5R01HL141943-05				\$92,184	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	5R01HL155207-04				\$463,622	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	5R01HL158918-04			\$52,170	\$395,963	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	5R01HL168179-03			\$335,121	\$550,697	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	5R01HL169944-02			\$255,040	\$496,497	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	5R01HL173598-02				\$362,394	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	5R35HL140025-07				\$550,784	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	5U01HL156620-05			\$218,229	\$868,332	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	VUMC104074(R01HL118979)	University of Minnesota	VUMC104074(R01HL118979)		\$19,128	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	VUMC107464(R01HL156993)	University of Arizona	VUMC107464(R01HL156993)		\$41,089	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	VUMC108481(R01HL157346)	Carnegie Mellon	VUMC108481(R01HL157346)		\$19,189	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	VUMC110797(P01HL158505)	University of Minnesota	VUMC110797(P01HL158505)		\$91,584	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	VUMC111359(K23HL163330)	University of California at San Diego	VUMC111359(K23HL163330)		\$3,029	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	VUMC124531(R01HL148665)	Fred Hutchinson Cancer Center	VUMC124531(R01HL148665)		\$39,192	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	VUMC127719(UG1HL138645)	Icahn School of Medicine at Mount Sinai	VUMC127719(UG1HL138645)		\$27,500	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	VUMC128252(U24HL173304)	Research Triangle Institute	VUMC128252(U24HL173304)		\$24,642	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	VUMC63541(UG1HL138645)	Icahn School of Medicine at Mount Sinai	VUMC63541(UG1HL138645)		\$0	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	VUMC67142(R01HL144113)	Oregon Health & Science University	VUMC67142(R01HL144113)		\$32,635	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	VUMC75160(R01HL101972)	Oregon Health & Science University	VUMC75160(R01HL101972)		\$73,068	\$4,507,730	Research and Development	\$559,144,589
BLOOD DISEASES AND RESOURCES RESEARCH	93.839	VUMC93012(R61HL156508)	Stasys Medical Corporation	VUMC93012(R61HL156508)		\$46,470	\$4,507,730	Research and Development	\$559,144,589
TRANSLATION AND IMPLEMENTATION SCIENCE RESEARCH FOR HEART, LUNG, BLOOD DISEASES, AND SLEEP DISORDERS	93.840	1T32HL170986-01				\$103,793	\$4,105,704	Research and Development	\$559,144,589
TRANSLATION AND IMPLEMENTATION SCIENCE RESEARCH FOR HEART, LUNG, BLOOD DISEASES, AND SLEEP DISORDERS	93.840	5R01HL157596-04			\$159,672	\$520,423	\$4,105,704	Research and Development	\$559,144,589
TRANSLATION AND IMPLEMENTATION SCIENCE RESEARCH FOR HEART, LUNG, BLOOD DISEASES, AND SLEEP DISORDERS	93.840	5R01HL163437-03			\$147,883	\$1,553,236	\$4,105,704	Research and Development	\$559,144,589
TRANSLATION AND IMPLEMENTATION SCIENCE RESEARCH FOR HEART, LUNG, BLOOD DISEASES, AND SLEEP DISORDERS	93.840	5R01HL164482-03			\$15,195	\$834,202	\$4,105,704	Research and Development	\$559,144,589
TRANSLATION AND IMPLEMENTATION SCIENCE RESEARCH FOR HEART, LUNG, BLOOD DISEASES, AND SLEEP DISORDERS	93.840	VUMC84189(OT2HL156812)(Master VUMC67453)	Research Triangle Institute	VUMC84189(OT2HL156812)(Master VUMC67453)		(\$7,171)	\$4,105,704	Research and Development	\$559,144,589
TRANSLATION AND IMPLEMENTATION SCIENCE RESEARCH FOR HEART, LUNG, BLOOD DISEASES, AND SLEEP DISORDERS	93.840	VUMC86800(R01HL154153)	University of Pittsburgh	VUMC86800(R01HL154153)		\$88,285	\$4,105,704	Research and Development	\$559,144,589
TRANSLATION AND IMPLEMENTATION SCIENCE RESEARCH FOR HEART, LUNG, BLOOD DISEASES, AND SLEEP DISORDERS	93.840	VUMC88227(UH3HL154297)	Northwestern University	VUMC88227(UH3HL154297)		\$14,012	\$4,105,704	Research and Development	\$559,144,589
TRANSLATION AND IMPLEMENTATION SCIENCE RESEARCH FOR HEART, LUNG, BLOOD DISEASES, AND SLEEP DISORDERS	93.840	VUMC91864(Master VUMC67453)(OT2HL156812)	Research Triangle Institute	VUMC91864(Master VUMC67453)(OT2HL156812)	\$906,353	\$935,715	\$4,105,704	Research and Development	\$559,144,589
TRANSLATION AND IMPLEMENTATION SCIENCE RESEARCH FOR HEART, LUNG, BLOOD DISEASES, AND SLEEP DISORDERS	93.840	VUMC96915(Master VUMC63105)	National Marrow Donor Program (BeTheMatch Foundation)	VUMC96915(Master VUMC63105)		\$307	\$4,105,704	Research and Development	\$559,144,589
TRANSLATION AND IMPLEMENTATION SCIENCE RESEARCH FOR HEART, LUNG, BLOOD DISEASES, AND SLEEP DISORDERS	93.840	VUMC98590(OT2HL161847)	Weill Medical College of Cornell University	VUMC98590(OT2HL161847)		\$62,902	\$4,105,704	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	1R01AR084312-01A1				\$41,796	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	1R13AR082704-01				\$5,144	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	1R13AR084340-01				\$15,000	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	2R01AR060846-10			\$9,652	\$279,859	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	5K08AR072757-05				\$0	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	5K08AR080808-04				\$162,939	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	5K08AR081405-03				\$172,454	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	5K23AR082990-03				\$77,282	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	5R01AR060846-09			\$6,615	\$40,904	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	5R01AR063157-11			\$37,396	\$354,337	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	5R01AR073196-06				\$299,265	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	5R01AR076516-05				\$186,873	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	5R01AR080629-04				\$453,026	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	5R21AR080372-03				\$189,545	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	5R21AR080387-02				\$88,607	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	5R21AR080914-02			\$25,844	\$96,076	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	7R21AR080233-02			\$19,267	\$93,242	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	R01 AR073874	Emory University	R01 AR073874		(\$70)	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC106503(R21AR079085)	Masonic Medical Research Institute	VUMC106503(R21AR079085)		\$3,575	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC107611(P50AR070590)	Case Western Reserve University	VUMC107611(P50AR070590)		\$1,086	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC108667(T32AR059039)	Vanderbilt University	VUMC108667(T32AR059039)		\$12,158	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC109295(R01AR075422)	Cleveland Clinic Lerner College of Medicine	VUMC109295(R01AR075422)		\$13,542	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC109409(R01AR078715)	Yale University	VUMC109409(R01AR078715)		\$122,583	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC109697(T32AR059039)	Vanderbilt University	VUMC109697(T32AR059039)		\$44,694	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC111671(AR075422S1)	Cleveland Clinic Lerner College of Medicine	VUMC111671(AR075422S1)		\$61,807	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC118937(UC2AR081032)	Oklahoma Medical Research Foundation	VUMC118937(UC2AR081032)		\$320,065	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC120725(T32AR059039)	Vanderbilt University	VUMC120725(T32AR059039)		\$110,414	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC122001(R01AR073486)	University of California Los Angeles	VUMC122001(R01AR073486)		\$15,358	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC124963	Vanderbilt University	VUMC124963		\$71,341	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC133729/R01AR074989	University of Michigan	VUMC133729/R01AR074989		\$178,198	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC136576(T32AR059039)	Vanderbilt University	VUMC136576(T32AR059039)		\$7,395	\$3,855,224	Research and Development	\$559,144,589

VANDERBILT UNIVERSITY MEDICAL CENTER
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Fiscal Period 7/1/2024 - 6/30/2025

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ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC68489(R01AR074131)	Cleveland Clinic Lerner College of Medicine	VUMC68489(R01AR074131)		\$18,870	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC76553(R01AR075422)	Cleveland Clinic Lerner College of Medicine	VUMC76553(R01AR075422)		(\$11,365)	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC80141(UH3AR076387)	University of Iowa	VUMC80141(UH3AR076387)		\$172,602	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC88694(R01AR055557)	Brigham and Women's Hospital	VUMC88694(R01AR055557)		\$6,636	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC88767(UH3AR077360)	Johns Hopkins University School of Medicine	VUMC88767(UH3AR077360)		\$152,511	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC90548(R01AR074989)	University of Texas, Southwestern Med Center	VUMC90548(R01AR074989)		(\$8,969)	\$3,855,224	Research and Development	\$559,144,589
ARTHRITIS, MUSCULOSKELETAL AND SKIN DISEASES RESEARCH	93.846	VUMC93422(R01AR079139)	Washington University	VUMC93422(R01AR079139)		\$6,444	\$3,855,224	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	1K08DK133691-01				\$0	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	1R01DK137997-01A1				\$117,929	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	1R01DK139048-01			\$83,914	\$300,803	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	1R01DK141801-01				\$300,779	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	1R01DK141803-01				\$38,647	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	1R56DK138826-01A1				\$26,401	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	1U01DK123821-01 (Yr 5)			\$77,476	\$44,082	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	1U01DK140952-01				\$370,559	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	2T32DK007673-32				\$388,479	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	3K08DK135931-03S1			\$59,190	\$149,739	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	3R01DK109102-10S1				\$356,994	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	3R01DK115545-06S1			\$12,832	(\$140)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	3R01DK127178-03S1				\$12,065	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	3T32DK007673-31S1			\$64,340	\$146,644	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	3U01DK137533-02S2 (NCE)			\$1,215,055	\$4,322,079	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5K08DK132507-04				\$153,859	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5K08DK134879-03				\$145,750	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5K23DK114566-05				\$6,691	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5K23DK118118-04				\$26,218	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5K23DK123392-03				(\$171)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5K23DK129774-02				(\$463)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5K23DK131341-04				\$142,327	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5K23DK135414-03				\$141,454	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5K23DK135420-03				\$187,648	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5K23DK136974-02				\$160,781	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5K23DK140531-02				\$158,258	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5K26DK138374-02				\$135,594	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5P30DK020593-48			\$537,551	\$2,225,072	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5P30DK058404-24			\$223,408	\$1,208,517	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5P30DK114809-05				(\$25)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R00DK119413-05				\$141,630	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK018381-52			\$39,132	\$94,858	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK018381-54			\$3,209	\$848,430	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK048370-29			\$157,893	\$582,624	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK051265-28				\$593,174	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK051610-30			\$113,794	\$490,231	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK056942-17				(\$20)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK058587-24				\$150,098	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK062794-19				\$750	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK062794-21				\$769,145	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK069921-18				(\$3,116)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK069921-21				\$542,353	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK081134-13				\$175,974	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK093501-14			\$60,666	(\$255,514)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK093660-11				\$7,744	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK095785-10				(\$922)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK095785-13				\$753,433	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK099467-10				\$53,382	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK105550-10				\$455	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK105550-13				\$425,914	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK110166-05				(\$30,360)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK110375-09			\$439,791	\$763,292	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK113423-04				\$74,123	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK116957-05				\$73,767	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK116964-05				(\$1,295)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK117144-05				\$156	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK118407-05				\$607,910	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK119212-05				\$272,822	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK120025-04				\$3	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK120626-04				(\$30)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK120821-03				\$215	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK121101-05				\$1,340	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK121101-07				\$574,146	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK121316-04				(\$10)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK122075-05				\$20,918	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK124845-05			\$144,997	\$692,672	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK125794-04			\$338,941	\$686,947	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK125895-04			\$12,436	\$13,109	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK126721-05				\$472,685	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK126890-04			\$15,111	\$309,576	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK127912-04			\$242,368	\$464,405	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK128190-04				\$343,189	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK128200-04				\$5,029	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK128293-04				\$39,779	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK129202-03				\$14,196	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK129624-04			\$23,884	\$367,280	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK131070-04				\$464,514	\$51,866,143	Research and Development	\$559,144,589

VANDERBILT UNIVERSITY MEDICAL CENTER
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Fiscal Period 7/1/2024 - 6/30/2025

Federal Awarding Agency/Program Title	Assistance Listing Number	Additional Award Identification (Optional)	Name of Funder Pass-Through Entity	Identifying Number Assigned By Funder Pass-Through Entity	Total Amount Provided to Sub-Recipients	Federal Expenditures	Federal Program Total	Cluster Name	Cluster Total
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK131101-04				\$500,836	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK131104-04				\$470,351	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK131129-04			\$162,471	\$710,768	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK131529-04				\$1,316,535	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK131810-02			\$93,539	\$516,256	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK132155-04			\$26,936	\$874,964	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK132236-02				\$641,099	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK132669-04			\$27,906	\$492,610	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK133415-03			\$22,383	\$665,485	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK133442-02			\$173,970	\$459,723	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK133512-02			\$29,076	\$673,783	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK133530-03			\$255,474	\$856,561	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK134692-03			\$50,237	\$242,734	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK135764-03				\$887,064	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK135938-03			\$301,954	\$616,812	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK135950-02				\$421,701	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK136695-02				\$686,807	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK136891-03			\$10,276	\$359,392	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK136893-02			\$52,664	\$450,402	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK137110-02			\$157,713	\$299,731	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK137302-03			\$90,372	\$435,977	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK139322-02				\$229,665	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R01DK140190-02			\$12,342	\$509,078	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R03DK129559-02				\$81,227	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R03DK129628-02				\$52,819	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R18DK123373-05				\$194,502	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R21DK133742-02			\$114,254	\$218,934	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R25DK096999-11				(\$1,500)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5R25DK096999-13				\$109,011	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5RC2DK140865-02			\$231,544	\$505,494	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5T32DK007061-51				\$352,613	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5T32DK007569-36			\$9,558	\$284,373	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5T35DK007383-46				\$105,742	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5U01DK112271-05			\$56,854	\$99,443	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5U01DK116093-08				\$126,880	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5U01DK123013-03			\$126,552	\$442,939	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5U01DK123716-05			\$525,092	\$692,139	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5U01DK129989-04			\$436,885	\$876,421	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5U01DK135017-03			\$416,005	\$1,084,908	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	5U01DK140743-02			\$7,344	\$168,259	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	7K01DK136926-03				\$20,477	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	7K23DK1325173-02				\$61,444	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	R01DK101332-12				\$424,815	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	R18 DK118471	COM Affiliation, Inc. (Albert Einstein College of Medicine managed by Montefiore)	R18 DK118471		\$560	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	U01 DK104833	Medical University of South Carolina	U01 DK104833		(\$5,827)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC100003(R01DK124719)	University of Utah	VUMC100003(R01DK124719)		\$227,918	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC100129(R01DK128710)	Vanderbilt University	VUMC100129(R01DK128710)		\$3,663	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC101213(U24DK098085)	City of Hope	VUMC101213(U24DK098085)		\$394,745	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC102910(R01DK132948)	University of South Carolina	VUMC102910(R01DK132948)		\$355,562	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC104120(P30DK020541)	COM Affiliation, Inc. (Albert Einstein College of Medicine managed by Montefiore)	VUMC104120(P30DK020541)	\$39,268	\$121,411	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC106157(R01DK130296)	University of Utah	VUMC106157(R01DK130296)		(\$19,038)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC106559(U01DK103168)	Baylor College of Medicine	VUMC106559(U01DK103168)		\$29,309	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC106832(U24DK133700)	University of Florida	VUMC106832(U24DK133700)		\$16,182	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC106933(R01DK093094)	Columbia University	VUMC106933(R01DK093094)		\$86,873	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC106957(R01DK120814)	Emory University	VUMC106957(R01DK120814)		\$158,268	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC107517(R01DK132338)	Vanderbilt University	VUMC107517(R01DK132338)		\$75,077	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC107790(R01DK128823)	Georgia State University	VUMC107790(R01DK128823)		\$189,160	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC107904(R01DK133847)	Massachusetts General Hospital	VUMC107904(R01DK133847)		\$130,981	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC108003(R01DK129469)	University of Michigan	VUMC108003(R01DK129469)		\$285,544	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC108522(U01DK133766)	Vanderbilt University	VUMC108522(U01DK133766)		\$62,498	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC109078(U01DK100867)	University of North Carolina	VUMC109078(U01DK100867)		\$1,853	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC110656(R01DK135597)	Vanderbilt University	VUMC110656(R01DK135597)		\$261,569	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC111124(R01DK092217)	Northwestern University	VUMC111124(R01DK092217)		\$40,173	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC111194 (R01DK128207)	Northwestern University	VUMC111194 (R01DK128207)		\$156,974	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC111495(R01DK135308)	University of Kansas Medical Center	VUMC111495(R01DK135308)		\$17,057	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC112122 (U2CDK135073)	Vanderbilt University	VUMC112122 (U2CDK135073)		\$10,356	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC112593(R01DK134575)	University of Pennsylvania	VUMC112593(R01DK134575)		\$104,776	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC113201(R01DK132299)	Broad Institute of MIT and Harvard	VUMC113201(R01DK132299)		\$154,922	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC113518(U24DK128851)	Augusta University	VUMC113518(U24DK128851)		\$30,647	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC114362(R01DK127589)	Nationwide Children's Hospital	VUMC114362(R01DK127589)		\$2,603	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC115519 (R01DK135032)	University of Pennsylvania	VUMC115519 (R01DK135032)		\$57,414	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC117730(R01DK126959)	University of North Carolina	VUMC117730(R01DK126959)		\$6,477	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC118021 (U24DK138515)	University of Michigan	VUMC118021 (U24DK138515)		\$297,194	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC118106(R01DK133076)	University of Kentucky	VUMC118106(R01DK133076)		\$216,148	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC118954(U01DK136523)	Columbia University	VUMC118954(U01DK136523)		\$85,868	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC119424(U34DK136922)	Northwestern University	VUMC119424(U34DK136922)		\$41,794	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC121936(R01DK127270)				\$282,436	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC122723(R01DK139631)	Icahn School of Medicine at Mount Sinai	VUMC122723(R01DK139631)		\$223,221	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC123113(T32DK007563)	Vanderbilt University	VUMC123113(T32DK007563)		\$69,398	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC123147(DK135567)	University of Arizona	VUMC123147(DK135567)		\$177,667	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC123749(T32DK007563-36)	Vanderbilt University	VUMC123749(T32DK007563-36)		\$36,000	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC125364(R01DK128710)	Vanderbilt University	VUMC125364(R01DK128710)		\$7,013	\$51,866,143	Research and Development	\$559,144,589

VANDERBILT UNIVERSITY MEDICAL CENTER
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Fiscal Period 7/1/2024 - 6/30/2025

Federal Awarding Agency/Program Title	Assistance Listing Number	Additional Award Identification (Optional)	Name of Funder Pass-Through Entity	Identifying Number Assigned By Funder Pass-Through Entity	Total Amount Provided to Sub-Recipients	Federal Expenditures	Federal Program Total	Cluster Name	Cluster Total
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC125407(R01DK128710)	Vanderbilt University	VUMC125407(R01DK128710)		\$13,850	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC126416(R01DK140039)	University of Texas: Dallas	VUMC126416(R01DK140039)		\$73,137	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC127274(R01KD139133)	Duke University	VUMC127274(R01KD139133)		\$23,993	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC128069(U01DK110961)	Childrens Hospital of Philadelphia	VUMC128069(U01DK110961)		\$88,320	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC128179 (R01DK128187)	Oregon Health & Science University	VUMC128179 (R01DK128187)		\$68,434	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC128732(R01DK126987)	Temple University	VUMC128732(R01DK126987)		\$19,039	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC129233(R01DK139598)	University of North Carolina-Chapel Hill	VUMC129233(R01DK139598)		\$100,991	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC129615 (U01DK100867)	University of North Carolina-Chapel Hill	VUMC129615 (U01DK100867)		\$9,670	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC130202(R01DK141455)	Johns Hopkins University School of Medicine	VUMC130202(R01DK141455)		\$18,683	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC130203(DK128847)	University of South Florida	VUMC130203(DK128847)		\$51,491	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC131321(R01DK093770)	Johns Hopkins	VUMC131321(R01DK093770)		\$13,916	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC132218(RC2DK118640)	University of California Los Angeles	VUMC132218(RC2DK118640)		\$384,690	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC132281(P50DK096373)	University of Virginia-Charlottesville	VUMC132281(P50DK096373)		\$5,278	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC135004 (R01DK141666)	Yale University	VUMC135004 (R01DK141666)		\$36,105	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC135418(R01DK123041)	University of Pennsylvania	VUMC135418(R01DK123041)		\$74,283	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC38829(U01DK094157)	Case Western Reserve University	VUMC38829(U01DK094157)		\$163,790	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC53531(U01DK098246)	George Washington University	VUMC53531(U01DK098246)		\$14,288	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC55441(U01DK106993)	University of South Florida	VUMC55441(U01DK106993)		\$89,182	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC69125(U54DK118612)	University of Chicago	VUMC69125(U54DK118612)		(\$21,233)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC69125(U54DK118612)	University of Chicago	VUMC69125(U54DK118612)		\$129,545	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC72082(U01DK120456)	University of Miami	VUMC72082(U01DK120456)		(\$1,880)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC77841(R01DK122797)	University of California-San Francisco	VUMC77841(R01DK122797)		\$82,936	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC77982(RC2DK118640)	University of California Los Angeles	VUMC77982(RC2DK118640)	\$1,773	\$2,547	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC81720(U01DK106993)	University of South Florida	VUMC81720(U01DK106993)		\$266,847	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC81882(R01DK121709)	University of Michigan	VUMC81882(R01DK121709)		\$53,492	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC82725(R01DK087635)	University of Pennsylvania	VUMC82725(R01DK087635)		\$2,001	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC82728(R01DK087635)	University of Pennsylvania	VUMC82728(R01DK087635)		\$6,595	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC82759(U01DK123743)	Stanford University	VUMC82759(U01DK123743)		\$6,889	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC84991(U01DK100867)	University of North Carolina	VUMC84991(U01DK100867)		(\$1,790)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC85124(R01DK124063)	University of Washington	VUMC85124(R01DK124063)		(\$10,986)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC87711(UC2DK126122)	University of Pittsburgh	VUMC87711(UC2DK126122)		\$191,938	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC87856(R01DK050277)	Vanderbilt University	VUMC87856(R01DK050277)		\$2,545	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC88369(U01DK065176)	Duke University	VUMC88369(U01DK065176)		\$42,591	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC90549(R01DK103831)	Vanderbilt University	VUMC90549(R01DK103831)		\$60,105	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC90912(R01DK124385)	Wistar Institute	VUMC90912(R01DK124385)		\$25,250	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC91057(U01DK126654)	University of Pennsylvania	VUMC91057(U01DK126654)		\$120,266	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC91813(R01DK088327)	Massachusetts General Hospital	VUMC91813(R01DK088327)		\$304,367	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC94705(R01DK123019)	Massachusetts General Hospital	VUMC94705(R01DK123019)		\$52,131	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC96416(U01DK112217)	University of Pennsylvania	VUMC96416(U01DK112217)	\$5,760	\$1,044,194	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC97512 (R01DK105821)	University of Pennsylvania	VUMC97512 (R01DK105821)		(\$8,527)	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC97577(R01DK129793)	University of California, Davis	VUMC97577(R01DK129793)		\$99,487	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC97597(R01DK108968)	Washington University	VUMC97597(R01DK108968)		\$14,278	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC98017(R01DK127084)	University of Texas Health Sciences Center at Houston	VUMC98017(R01DK127084)		\$246,249	\$51,866,143	Research and Development	\$559,144,589
DIABETES, DIGESTIVE, AND KIDNEY DISEASES EXTRAMURAL RESEARCH	93.847	VUMC98798(R01DK128803)	University of California at San Diego	VUMC98798(R01DK128803)		\$9,733	\$51,866,143	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	1K08NS140767-01				\$76,881	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	1R01NS141191-01				\$416,169	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	1RF1NS126144-01 (Yr 3)			\$87,827	\$1,012,557	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	1U01NS129143-01A1 (NCE)			\$364,985	\$529,555	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	1UF1NS107666-01 (Yr 3)				\$581	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	2U01NS134349-11			\$22,906	\$737,208	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	2U24NS107128-06				(\$318,299)	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	3R01NS118483-05S1			\$446,182	\$671,392	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	3R01NS134625-02S1			\$146,363	\$578,590	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	3U01NS134349-10				\$70,492	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	4K00NS130872-02				\$22,634	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5K22NS123507-04				\$262,546	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5K23NS126628-03				\$176,958	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5K23NS131592-03				\$178,914	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5R01NS078680-14				\$652,080	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5R01NS092961-11				\$476,504	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5R01NS100980-05				(\$104,739)	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5R01NS107424-05				(\$12,803)	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5R01NS108445-05			\$35,955	\$286,448	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5R01NS109114-05			(\$1,469)	\$27,612	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5R01NS110130-05			\$9,893	\$352,040	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5R01NS110661-05			\$129,349	\$282,425	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5R01NS112252-05			\$119,476	\$208,096	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5R01NS113171-05			\$113,751	\$255,512	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5R01NS113832-05			\$111,239	\$516,855	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5R01NS117816-05				\$413,425	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5R01NS121718-04				\$397,196	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5R01NS123281-04			\$15,203	\$572,523	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5R01NS133101-02			\$52,886	\$458,425	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5R01NS133169-02				\$662,243	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5R01NS136316-02				\$395,574	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	5U24NS107128-07				\$780,619	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	U01 NS095869	University of Cincinnati Medical Center	U01 NS095869		\$854	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	U01 NS110728	University of Cincinnati	U01 NS110728		\$6,440	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC100312(R01NS121720)	Stanford University	VUMC100312(R01NS121720)		\$4,148	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC102925(R01NS119896)	University of California-San Francisco	VUMC102925(R01NS119896)		\$3,970	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC105521(U01NS122419)	New York University	VUMC105521(U01NS122419)		\$48,260	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC109400(RF1NS130334)	Vanderbilt University	VUMC109400(RF1NS130334)		\$515,825	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC109401(RF1NS129735)	Vanderbilt University	VUMC109401(RF1NS129735)		\$369,212	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC110689(R01NS120557)	Johns Hopkins University School of Medicine	VUMC110689(R01NS120557)		\$7,216	\$14,153,526	Research and Development	\$559,144,589

VANDERBILT UNIVERSITY MEDICAL CENTER
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Fiscal Period 7/1/2024 - 6/30/2025

Federal Awarding Agency/Program Title	Assistance Listing Number	Additional Award Identification (Optional)	Name of Funder Pass-Through Entity	Identifying Number Assigned By Funder Pass-Through Entity	Total Amount Provided to Sub-Recipients	Federal Expenditures	Federal Program Total	Cluster Name	Cluster Total
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC112336	Childrens Hospital of Philadelphia	VUMC112336		\$232,048	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC114342(R61NS127268)	Dignity Health	VUMC114342(R61NS127268)		\$188,652	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC115524(1R01NS129855)	Vanderbilt University	VUMC115524(1R01NS129855)		\$154,627	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC116357(U01NS055903)	University of Iowa	VUMC116357(U01NS055903)		\$515,926	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC123743(UM1NS132207)	University of Minnesota	VUMC123743(UM1NS132207)		\$19,015	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC124483 (RF1NS129032)	Massachusetts Institute of Technology	VUMC124483 (RF1NS129032)		\$109,156	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC126418(R01NS127187)	University of Pittsburgh	VUMC126418(R01NS127187)		\$512,407	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC129855(R01NS126455)	University of Texas, Southwestern Med Center	VUMC129855(R01NS126455)		\$5,381	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC132258(R01NS127439)	University of Nebraska Medical Center	VUMC132258(R01NS127439)		\$53,312	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC132668(R01NS136197)	University of California-San Francisco	VUMC132668(R01NS136197)		\$7,494	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC39287(NeuroNext - NN111)	Massachusetts General Hospital	VUMC39287(NeuroNext - NN111)		\$26,992	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC57656(U01NS080168)	Mayo Clinic Hospital	VUMC57656(U01NS080168)		\$17,541	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC68327(R01NS102371)	Massachusetts General Hospital	VUMC68327(R01NS102371)		\$8,256	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC75452(R01NS107281)	Washington University	VUMC75452(R01NS107281)		\$7,530	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC75791(R01NS105746)	Massachusetts General Hospital	VUMC75791(R01NS105746)		\$134,629	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC82086(U01NS107486)	University of Utah	VUMC82086(U01NS107486)		\$33,411	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC83014(R01NS112171)	Loyola University Chicago	VUMC83014(R01NS112171)		\$6,476	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC85315(R01NS110665)	Vanderbilt University	VUMC85315(R01NS110665)		\$5,876	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC85957(R01NS118580)	Vanderbilt University	VUMC85957(R01NS118580)		(\$116)	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC88488(R01NS120518)	Vanderbilt University	VUMC88488(R01NS120518)		\$10,689	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC89879(R01NS116148)	Childrens Research Institute	VUMC89879(R01NS116148)		\$70,269	\$14,153,526	Research and Development	\$559,144,589
EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	93.853	VUMC90038(R21NS116434)	Dartmouth-Hitchcock Clinic	VUMC90038(R21NS116434)		\$41,817	\$14,153,526	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	1K08AI181763-01				(\$3,352)	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	1K08AI185260-01A1				\$54,493	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	1K08AI185310-01				\$151,668	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	1K24AI177947-01				\$0	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	1R01AI187244-01				\$101,217	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	1R01AI189950-01				\$79,840	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	1R37AI184117-01A1				\$70,996	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	1R56AI174911-01A1			\$261,135	\$476,016	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	1U19AI181979-01			\$5,675,647	\$8,573,985	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	2R01AI093234-11			\$87,926	\$235,544	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	2R01AI138581-06A1			\$243,456	\$532,326	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	3P30AI110527-10S2			\$1,423,902	\$3,011,051	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	3R01AI101171-11S1			\$1,943	\$1,117	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	3R01AI108197-10S1				\$100,554	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	3R01AI131722-05S1				\$58	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	3R01AI142095-05S1				\$51,131	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	3R01AI143710-06S1			\$145,044	\$340,898	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	3UM1AI148452-04S1			\$108,197	\$472,259	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	4R01AI164587-04				\$28,868	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5F32AI157215-03				(\$5,864)	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5F32AI169905-02				\$7,592	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5K08AI150352-06			\$23,422	\$184,877	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5K23AI156132-05				\$127,879	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5K23AI168496-04				\$204,310	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5K24AI148459-05				\$160,665	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5K24AI150349-06				\$157,341	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI039657-25				\$89,463	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI073843-16				\$506,507	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI077505-16			\$450,145	\$809,733	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI093234-10				\$12,295	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI101171-14			\$198,750	\$804,607	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI118932-11			\$331,137	\$917,111	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI130459-05				\$3,749	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI131771-05				(\$136,341)	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI132560-05				(\$549)	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI136526-03				(\$547)	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI137082-04				\$0	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI138581-05				\$82	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI139046-04				\$386,492	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI139172-05				\$2,879	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI141448-05				\$245,737	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI145992-05			\$233,859	\$485,437	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI147765-05			\$172,949	\$452,501	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI149722-05				\$458,809	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI150701-05				\$353,975	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI151210-05			\$14,502	\$229,779	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI152693-04				\$176,502	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI153167-05				\$484,014	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI155621-06				\$584,606	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI155646-05			\$91,191	\$428,300	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI155668-05			\$311,461	\$934,129	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI157843-04			\$215,789	\$675,526	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI158605-04			\$465,147	\$631,180	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI164587-03				\$489,578	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI168210-03			\$49,610	\$652,764	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI168302-03				\$653,196	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI168468-03			\$228,651	\$698,951	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI170172-02			\$24,690	\$557,177	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI172156-04			\$588,069	\$930,927	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI173795-03				\$720,594	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI175245-03				\$1,191,741	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI176521-03				\$54,170	\$75,151,894	Research and Development	\$559,144,589

VANDERBILT UNIVERSITY MEDICAL CENTER
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Fiscal Period 7/1/2024 - 6/30/2025

Federal Awarding Agency/Program Title	Assistance Listing Number	Additional Award Identification (Optional)	Name of Funder Pass-Through Entity	Identifying Number Assigned By Funder Pass-Through Entity	Total Amount Provided to Sub-Recipients	Federal Expenditures	Federal Program Total	Cluster Name	Cluster Total	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI177010-02			\$166,392	\$651,114	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI178929-02			\$159,967	\$290,962	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI179037-03				\$430,388	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI180038-02				\$404,644	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI180777-02				\$765,397	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI182159-02			\$4,029	\$665,826	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI182247-02			\$172,787	\$695,065	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R01AI184471-02			\$32,837	\$341,444	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R21AI149262-02				(\$378)	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R21AI150384-02				\$678	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R21AI154064-02				(\$3,667)	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R21AI156292-02				(\$1,085)	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R21AI163586-02				\$26,749	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R21AI164107-02			\$68,358	\$107,808	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R21AI164760-02				\$4,621	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R21AI166584-02				\$180,804	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R21AI166870-02				\$94,790	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R21AI168832-02				\$149,589	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R21AI171466-02				\$118,451	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R21AI175788-02			\$27,822	\$216,298	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R21AI176219-02				\$130,685	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R21AI178568-02			\$7,104	\$303,190	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R21AI186087-02			\$30,099	\$246,975	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R21AI171901-02				(\$1,778)	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R24AI124872-11			\$880,533	\$2,328,320	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R37AI095755-16				\$501,320	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5R37AI131771-08			\$637,385	\$1,073,526	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5T32AI007474-30				\$255,981	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5T32AI095202-15				\$338,041	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5U01AI069923-20			\$2,364,983	\$3,931,912	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5U01AI150739-05				\$435,135	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5U01AI152967-05				\$325,530	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5U01AI154659-06			\$430,820	\$2,815,892	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5U01AI155299-05				\$2,284,798	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5U01AI167789-04				\$194,863	\$1,110,664	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5U01AI167799-03			\$324,862	\$1,499,353	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5U01AI172064-03			\$739,432	\$1,180,119	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5U01AI181927-02				\$278,013	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5U19AI095227-11				(\$10,520)	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5U19AI095227-16			\$250,858	\$1,916,116	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5U19AI174999-03			\$190,466	\$1,504,331	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5UM1AI069439-20			\$625,587	\$2,723,046	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	5UM1AI148452-06			\$244,053	\$1,328,790	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	7K01AI138863-06				(\$4,340)	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	R01 AI137523	Stanford University	R01 AI137523		\$141	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC	Vanderbilt University	VUMC		\$28,879	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC100483(R01AI165327)	University of Calgary	VUMC100483(R01AI165327)		\$33,731	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC102639(UM2AI130836)	Johns Hopkins University School of Medicine	VUMC102639(UM2AI130836)		(\$921)	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC102933(5U01AI169767)	University of Pennsylvania	VUMC102933(5U01AI169767)		\$208,754	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC103804(UM1AI068614)	Fred Hutchinson Cancer Center	VUMC103804(UM1AI068614)		\$223,584	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC103994(U19AI171292)	University of North Carolina	VUMC103994(U19AI171292)		\$481,709	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC104353(R01AI170228)	Meharry Medical College	VUMC104353(R01AI170228)		\$63,269	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC104795(U54AI170791)	University of Pittsburgh	VUMC104795(U54AI170791)		\$438,421	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC106117(75N91019D00024)	University of Minnesota	VUMC106117(75N91019D00024)		(\$5,012)	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC106166 VUMC106167 YR 1	Duke University	VUMC106166 VUMC106167 YR 1		\$6,510	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC106166(U54AI170752)	Duke University	VUMC106166(U54AI170752)		\$85,117	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC106167(U54AI170752)	Duke University	VUMC106167(U54AI170752)		\$22,802	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC106207(UM1AI068636)	University of California Los Angeles	VUMC106207(UM1AI068636)		\$48,224	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC106941(UM1AI068636)	University of California Los Angeles	VUMC106941(UM1AI068636)		\$14,495	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC107241(R01AI152142)	Centre for the Aids Program of Research in South Africa	VUMC107241(R01AI152142)		\$19,502	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC110775(R01AI154470)	Boston Childrens Hospital	VUMC110775(R01AI154470)		\$17,071	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC110799(U01AI176244)	Oklahoma Medical Research Foundation	VUMC110799(U01AI176244)		\$432,540	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC111455(R01AI143370)	Weill Medical College of Cornell University	VUMC111455(R01AI143370)		(\$48)	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC111917(U01AI163090)	University of Washington	VUMC111917(U01AI163090)		\$43,454	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC112683(U01AI174268)	Rutgers University	VUMC112683(U01AI174268)		\$667,016	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC113104(P01AI125181)	University of Maryland Baltimore	VUMC113104(P01AI125181)		\$421,566	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC114885(Master VUMC99151)(R24AI067039)	University of Alabama-Birmingham	VUMC114885(Master VUMC99151)(R24AI067039)		\$1,072	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC115865(T32AI138932)	Vanderbilt University	VUMC115865(T32AI138932)		\$5,506	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC116248(5R01AI178846-02)	University of Delaware	VUMC116248(5R01AI178846-02)		\$26,197	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC116976(R01AI173002)	University of California-San Francisco	VUMC116976(R01AI173002)		\$21,232	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC117106(R01AI168371)	Johns Hopkins University School of Medicine	VUMC117106(R01AI168371)		\$14,504	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC117433(R34AI174969)	University of Colorado Anschutz Medical Center	VUMC117433(R34AI174969)		\$26,515	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC118297(1R01AI181321-01)	University of California at San Diego	VUMC118297(1R						

VANDERBILT UNIVERSITY MEDICAL CENTER
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Fiscal Period 7/1/2024 - 6/30/2025

Federal Awarding Agency/Program Title	Assistance Listing Number	Additional Award Identification (Optional)	Name of Funder Pass-Through Entity	Identifying Number Assigned By Funder Pass-Through Entity	Total Amount Provided to Sub-Recipients	Federal Expenditures	Federal Program Total	Cluster Name	Cluster Total
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC130025(1U19AI181960-01)	Washington University	VUMC130025(1U19AI181960-01)	\$11,547	\$947,944	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC130245(1U01AI184071-01)	Massachusetts General Hospital	VUMC130245(1U01AI184071-01)		\$39,689	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC130615(R01AI183968)	University of Michigan	VUMC130615(R01AI183968)		\$34,044	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC131141(75N93024C00070)	Washington University	VUMC131141(75N93024C00070)		\$404,537	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC135614(R21AI173448)	Baylor College of Medicine	VUMC135614(R21AI173448)		\$52,767	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC33032(U01AI069918)	Johns Hopkins University School of Medicine	VUMC33032(U01AI069918)		\$91,836	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC41694(R01AI073755)	Washington University	VUMC41694(R01AI073755)		(\$57,540)	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC58960(FH1360)(UM1AI068619)	Family Health International	VUMC58960(FH1360)(UM1AI068619)		(\$14,500)	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC59225(U01AI096299)	COM Affiliation, Inc. (Albert Einstein College of Medicine managed by Montefiore)	VUMC59225(U01AI096299)		\$28,953	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC61674(T32AI112541)	Vanderbilt University	VUMC61674(T32AI112541)		\$4,719	\$75,151,894	Research and Development	\$559,144,589
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC63419(R01AI132178)	University of North Carolina-Chapel Hill	VUMC63419(R01AI132178)	(\$5,237)	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC63898(R01AI134430)	Boston University	VUMC63898(R01AI134430)	\$2,755	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC69624(R01AI141661)	University of Texas Medical Branch at Galveston	VUMC69624(R01AI141661)	\$406	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC71248 (UM1AI106701)	University of California Los Angeles	VUMC71248 (UM1AI106701)	\$274,835	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC71479 (UM1AI068636)	University of California Los Angeles	VUMC71479 (UM1AI068636)	\$18,301	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC72177(U19AI142764)	Henry M Jackson Foundation	VUMC72177(U19AI142764)	\$77,608	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC73703(U19AI142785)	University of Texas Medical Branch at Galveston	VUMC73703(U19AI142785)	\$121,575	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC73863(U19AI142759)	University of Alabama-Birmingham	VUMC73863(U19AI142759)	\$41,982	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC74801(U01AI136816)	Massachusetts General Hospital	VUMC74801(U01AI136816)	\$24,140	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC75400(R01AI136740)	Meharry Medical College	VUMC75400(R01AI136740)	(\$27,164)	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC77449(U19AI142790)	La Jolla Institute for Allergy and Immunology	VUMC77449(U19AI142790)	(\$2,911)	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC79001(75N3019C00055)	University of Maryland Baltimore	VUMC79001(75N3019C00055)	\$54,691	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC79225(UM1AI104681)	Duke University	VUMC79225(UM1AI104681)	\$28,380	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC79241(UM1AI104681)	Duke University	VUMC79241(UM1AI104681)	\$57,203	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC79551(R01AI139406)	Emory University	VUMC79551(R01AI139406)	\$21,464	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC79561(U54AI117804)	Cincinnati Children's Hospital Medical Center	VUMC79561(U54AI117804)	\$19,174	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC80667(R01AI108884)	University of Notre Dame	VUMC80667(R01AI108884)	\$11,424	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC81315(UM1AI068636)	University of California Los Angeles	VUMC81315(UM1AI068636)	\$3,221	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC81970(5R01AI148707)	University of Wisconsin Madison	VUMC81970(5R01AI148707)	\$146,255	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC84464(R01AI152183)	The University of Cape Town Lung Institute	VUMC84464(R01AI152183)	\$121,597	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC84940(R01AI150295)	Brigham and Women's Hospital	VUMC84940(R01AI150295)	(\$236)	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC86322(R01AI077653)	Indoor Biotechnologies, Inc.	VUMC86322(R01AI077653)	\$52,898	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC86412(R01AI157037)	Oregon Health & Science University	VUMC86412(R01AI157037)	\$27,590	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC87191(U01AI135950)	Stanford University	VUMC87191(U01AI135950)	\$7,908	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC87212(P01AI139449)	MD Anderson Cancer Center	VUMC87212(P01AI139449)	\$48,156	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC87697(R01AI157827)	Vanderbilt University	VUMC87697(R01AI157827)	\$391,730	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC88163(R01AI157155-05)	Washington University	VUMC88163(R01AI157155-05)	\$321,616	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC89580(UM1AI109565)	Benaroya Research Institute at Virginia Mason	VUMC89580(UM1AI109565)	\$6,551	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC91789(R01CA249211)(Mster VUMC63105)	National Marrow Donor Program (BeTheMatch Foundation)	VUMC91789(R01CA249211)(Mster VUMC63105)	\$3,916	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC93631(R01AI153827)	University of California Los Angeles	VUMC93631(R01AI153827)	\$19,676	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC94283(UM1AI160040)	University of Wisconsin Madison	VUMC94283(UM1AI160040)	\$33,268	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC94650(U54AI150225)	University of Alabama-Birmingham	VUMC94650(U54AI150225)	\$1,653	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC94896(R21AI164147)	University of Copenhagen	VUMC94896(R21AI164147)	(\$351)	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC94975(R24AI067039)	University of Alabama-Birmingham	VUMC94975(R24AI067039)	\$529,465	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC95576(75N93019C00055)	University of Maryland Baltimore	VUMC95576(75N93019C00055)	\$113,053	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC97265(UM1AI068636)	University of California Los Angeles	VUMC97265(UM1AI068636)	\$5,042	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC97521(R01AI154470)	Boston Childrens Hospital	VUMC97521(R01AI154470)	\$950	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC97990(R01AI161022)	Washington University	VUMC97990(R01AI161022)	\$80,177	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC98299(R21AI152869)	University of Michigan	VUMC98299(R21AI152869)	(\$2)	\$75,151,894	Research and Development	\$559,144,589	
ALLERGY AND INFECTIOUS DISEASES RESEARCH	93.855	VUMC98808(R01AI153356)	Vanderbilt University	VUMC98808(R01AI153356)	\$24,395	\$75,151,894	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	1R01GM157599-01			\$40,821	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	1R35GM156389-01			\$106,957	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	2R35GM133720-06			\$373,971	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	5K23GM134482-05			\$216,830	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	5K23GM150110-03			\$175,029	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	5K99GM151477-02			\$137,664	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	5R01GM126062-05			\$127,210	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	5R01GM130791-05			\$154,681	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	5R01GM132204-05			\$164,269	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	5R01GM132592-04			\$17,126	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	5R01GM133169-04			\$50,251	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	5R01GM138873-04			\$208,018	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	5R01GM139891-04			\$160,978	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	5R21GM144915-02			(\$307)	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	5R33GM144915-04			\$683,756	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	5R35GM131770-05			\$168,888	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	5R35GM138191-05			\$359,436	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	5R35GM141927-05			\$561,688	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	5R35GM145375-04			\$364,075	\$6,846,430	Research and Development	\$559,144,589	
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859</								

VANDERBILT UNIVERSITY MEDICAL CENTER
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BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	VUMC96349 (T32GM139800)	Vanderbilt University	VUMC96349 (T32GM139800)		\$15,584	\$6,846,430	Research and Development	\$559,144,589
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	VUMC97198(T32GM139800)	Vanderbilt University	VUMC97198(T32GM139800)		\$1,789	\$6,846,430	Research and Development	\$559,144,589
BIOMEDICAL RESEARCH AND RESEARCH TRAINING	93.859	VUMC98278(T32GM139800)	Vanderbilt University	VUMC98278(T32GM139800)		\$13,194	\$6,846,430	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	1R01HD113675-01A1			\$33,842	\$256,925	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	1R13HD116533-01				\$3,749	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	1R21HD113234-01				\$206,647	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	4R00HD108420-03				\$193,114	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5K12AR084232-26				\$568,201	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5K12HD043483-23				(\$4,229)	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5K12HD087023-11				\$460,350	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5K23HD104183-05				\$135,868	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5K99HD108420-02				\$19,613	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5P50HD103537-05			\$49,016	\$1,090,197	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5P50HD106446-04			\$133,818	\$1,588,383	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5R01HD071089-09			\$30,611	\$53,205	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5R01HD084500-06				(\$2)	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5R01HD093671-05				\$15,791	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5R01HD094946-05				(\$4,584)	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5R01HD097344-05				\$312,940	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5R01HD098213-05				\$115,915	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5R01HD098719-05				\$321,153	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5R01HD099777-04			\$36,775	\$368,015	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5R01HD100458-05			\$113,262	\$395,736	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5R01HD107695-04			\$37,090	\$826,273	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5R01HD109303-02			\$258,448	\$608,394	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5R01HD112169-02			\$144,644	\$492,229	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5R21HD103348-02			(\$27,759)	\$27,759	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	5R21HD104983-02			\$1,672	(\$4,095)	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC (R01HD114789)	University of Wisconsin Madison	VUMC (R01HD114789)		\$38,969	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC101098(R01HD107103)	Duke University	VUMC101098(R01HD107103)		(\$226)	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC101098(R01HD107103)	Duke University	VUMC101098(R01HD107103)		(\$212,588)	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC102957(R01HD104188)	Vanderbilt University	VUMC102957(R01HD104188)		\$242,229	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC105169(R01HD107002)	Virginia Commonwealth University	VUMC105169(R01HD107002)		\$16,661	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC107303 (R01HD110107)	Harvard Pilgrim Health Care	VUMC107303 (R01HD110107)		\$32,931	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC110360(R01HD107083)	Washington University	VUMC110360(R01HD107083)		\$63,257	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC112713(5P30HD106451)	Purdue University	VUMC112713(5P30HD106451)		\$9,029	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC116005(P30HD106451)	Trustees of Indiana University	VUMC116005(P30HD106451)		\$27,494	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC116582(R01HD110567)	University of Pennsylvania	VUMC116582(R01HD110567)		\$186,070	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC118605(R01HD112321)	Ann & Robert H. Lurie Children's Hospital of Chicago	VUMC118605(R01HD112321)		\$26,851	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC122286(K12HD047349)	University of Utah	VUMC122286(K12HD047349)		\$16,374	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC127025(75N93019C00052)	University of Georgia	VUMC127025(75N93019C00052)		\$370,366	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC136224(R01HD107002)	Emory University	VUMC136224(R01HD107002)		\$17,299	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC42957(HHSN2752010000031)(TO#2)	Duke University	VUMC42957(HHSN2752010000031)(TO#2)		\$424	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC69360(R01HD024356)	University of California, Davis	VUMC69360(R01HD024356)		\$261	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC78780(R01HD099742)	Washington University	VUMC78780(R01HD099742)		\$144,597	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC79443(R01HD089474)	Vanderbilt University	VUMC79443(R01HD089474)		\$8,277	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC84782(75N93019D00031)	Johns Hopkins University School of Medicine	VUMC84782(75N93019D00031)		\$43,597	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC85775(R01 HD096147)	Johns Hopkins University School of Medicine	VUMC85775(R01 HD096147)		(\$155,649)	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC86501(R01HD093933)	University of Kansas Medical Center	VUMC86501(R01HD093933)		\$1,437	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC87561(R01HD102752)	Vanderbilt University	VUMC87561(R01HD102752)		\$128,343	\$9,001,263	Research and Development	\$559,144,589
CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	93.865	VUMC88785(R44HD084151)	Miyazaki Enterprises, LLC	VUMC88785(R44HD084151)		\$3,231	\$9,001,263	Research and Development	\$559,144,589
AGING RESEARCH	93.866	1K23AG084850-01A1				\$162,960	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	1P30AG086403-01A1				\$989,546	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	1R01AG084550-01A1				\$218,626	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	1R21AG075643-01				\$126,061	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	1R21AG081823-01A1				\$150,220	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	1R21AG089699-01				\$331,907	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	1R56AG074279-01A1				\$16,246	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	1R56AG084550-01				\$71,601	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	1R56AG089926-01				\$315,123	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	1RF1AG061351-01 (Yr 5)			\$8,809	\$142,212	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	1RF1AG075341-01A1 (Yr 2)				\$826,733	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	1U54AG089326-01				\$564,366	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	2R56AG047992-07A1			\$1,444,815	\$1,678,211	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	3F32AG076276-01S1				(\$408)	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	3K23AG045966-06S1				(\$34)	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	3P20AG068082-03S1			\$4,194	\$461,704	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	3R01AG061161-05S1			\$13,173	\$851,178	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	3R01AG069795-05S1			\$89,473	\$359,790	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	4K00AG079810-03				\$9,968	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5K01AG066971-04				\$112,881	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5K01AG073584-04				\$104,191	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5K01AG073587-02				\$103,433	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5K01AG077038-04				\$111,683	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5K01AG083133-02				\$115,969	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5K01AG083223-03				\$110,305	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5K23AG070320-04				\$132,398	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5K23AG072030-05				\$200,600	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5K24AG046373-11				\$11	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5K24AG064114-05				\$106,303	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5K25AG076864-04				\$164,088	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5K76AG060001-05				(\$628)	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5K76AG064426-05				\$323,685	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG034962-12			\$900,818	\$2,406,714	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG058639-05				\$3,780,677	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG059716-05			(\$38,122)	(\$123,919)	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG061138-05			\$231,631	\$433,059	\$45,717,301	Research and Development	\$559,144,589

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AGING RESEARCH	93.866	5R01AG061518-05			\$52,827	(\$371,811)	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG062499-05				\$244,987	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG062574-05				\$414,294	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG062826-05			\$26,451	\$682,883	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG065249-04				\$455,410	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG065550-04				\$30,878	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG068606-04				\$136,042	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG071439-05			\$587,625	\$1,117,687	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG073439-05			\$407,535	\$874,365	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG073633-03			\$121,737	\$956,903	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG076785-04				\$465,120	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG081655-02				\$656,587	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG083159-02				\$493,975	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG083736-03			\$185,707	\$736,920	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG085287-02				\$658,732	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG085873-02			\$525,627	\$4,142,343	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG088657-02			\$719,038	\$1,227,913	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R01AG089200-02				\$276,611	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R21AG080420-02				\$118,331	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R21AG082416-02				\$106,568	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5R56AG068026-02				\$17	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	5U24AG074855-04			\$6,439,558	\$10,068,150	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	7R21AG077404-03				\$111,957	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC (R41AG085909)	Better Brains, Inc	VUMC (R41AG085909)		\$26,718	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 104284(R01AG064950)	Vanderbilt University	VUMC104284(R01AG064950)		\$2,023	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 104354(R56AG047992)	University of Southern California	VUMC104354(R56AG047992)		\$93,190	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 107114(R44AG076072)	CND Life Sciences	VUMC107114(R44AG076072)		\$2,130	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 108492(R01AG074959)	Dartmouth College	VUMC108492(R01AG074959)		\$178,689	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 108514(R24AG064025)	Northern California Institute for Research and Education	VUMC108514(R24AG064025)		\$1,614	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 108691(R01AG078803)	Vanderbilt University	VUMC108691(R01AG078803)		\$212,393	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 109009(R01AG071807)	Wake Forest University Health Sciences	VUMC109009(R01AG071807)		\$1,102	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 109238(R21AG073891)	Vanderbilt University	VUMC109238(R21AG073891)		(\$82,124)	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 110165 (R42AG080891)	VoiceLove LLC	VUMC110165 (R42AG080891)		\$281,900	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 113402(R01AG076998)	Weill Medical College of Cornell University	VUMC113402(R01AG076998)		\$93,887	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 113796(DP2AG082342)	Massachusetts General Hospital	VUMC113796(DP2AG082342)		\$1,116	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 113919(T32AG058524)	Vanderbilt University	VUMC113919(T32AG058524)		\$51,808	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 114008(R01AG078452)	University of Texas Health Sciences Center at Houston	VUMC114008(R01AG078452)		\$211,287	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 114289(R24AG064025)	Northern California Institute for Research and Education	VUMC114289(R24AG064025)		\$110,211	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 114295(R01AG079142)	Massachusetts General Hospital	VUMC114295(R01AG079142)		\$105,646	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 114401(R01AG073317)	NATIONAL JEWISH HEALTH	VUMC114401(R01AG073317)		\$16,153	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 114481(R24AG064025)	Northern California Institute for Research and Education	VUMC114481(R24AG064025)		\$71,746	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 116307(U19AG024904)	University of Southern California	VUMC116307(U19AG024904)		\$64,497	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 116623 (R01AG075073)	National Bureau of Economic Research, Incorporated	VUMC116623 (R01AG075073)		\$90,517	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 117116(R33AG071744)	Hebrew Rehabilitation Center	VUMC117116(R33AG071744)		\$7,130	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 118007(R01AG053798)	University of Southern California	VUMC118007(R01AG053798)		(\$810)	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 118215(RF1AG063755)	University of Michigan	VUMC118215(RF1AG063755)		\$45,945	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 118258(R01AG077644)	Vanderbilt University	VUMC118258(R01AG077644)		\$243,130	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 118333(U01AG082350)	University of Wisconsin Madison	VUMC118333(U01AG082350)		\$444,638	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 118384(R01AG074012)	University of Michigan	VUMC118384(R01AG074012)		\$279,209	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 118449(U19AG024904)	University of Wisconsin Madison	VUMC118449(U19AG024904)		\$11,505	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 118453(U24AG057437)	University of Southern California	VUMC118453(U24AG057437)		\$332,739	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 120159(U2CAG060426)	Northwestern University	VUMC120159(U2CAG060426)		\$617,062	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 121302(R01AG068324)	University of Southern California	VUMC121302(R01AG068324)		\$43,392	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 124391(R01AG067151)	Massachusetts Institute of Technology	VUMC124391(R01AG067151)		\$242,172	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 125921(R21AG086679)	Boston University	VUMC125921(R21AG086679)		\$248,783	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 126778(U24AG082930)	Wake Forest University Health Sciences	VUMC126778(U24AG082930)		\$158,000	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 127122(R01AG065248)	University of Southern California	VUMC127122(R01AG065248)		\$48,224	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 127471(R01AG064950)	Vanderbilt University	VUMC127471(R01AG064950)		\$9,984	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 128883(R01AG089717)	Vanderbilt University	VUMC128883(R01AG089717)		\$90,119	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 129769(R56AG089170)	Vanderbilt University	VUMC129769(R56AG089170)		\$25,767	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 129931(R33AG086944)	Northern California Institute for Research and Education	VUMC129931(R33AG086944)		\$10,830	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 130687 (P01AG027296)	Brown University	VUMC130687 (P01AG027296)		\$3,507	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 130743(R01AG092015)	Vanderbilt University	VUMC130743(R01AG092015)		\$66,531	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 130772(T32AG058524)	Vanderbilt University	VUMC130772(T32AG058524)		\$52,332	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 130797(R01AG084710)	Stanford University	VUMC130797(R01AG084710)		\$43,415	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 131354(R01AG090487)	Ohio State University	VUMC131354(R01AG090487)		\$16,596	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 131390(RF1AG089362)	Weill Medical College of Cornell University	VUMC131390(RF1AG089362)		\$79,508	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 131457(R01AG065550)	University of Alabama-Birmingham	VUMC131457(R01AG065550)		\$36,799	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 132186(P01AG027296)	Brown University	VUMC132186(P01AG027296)		\$105,922	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 133546(P30AG024824)	University of Michigan	VUMC133546(P30AG024824)		\$25,963	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 133600(RF1AG077474)	University of Pittsburgh	VUMC133600(RF1AG077474)		\$104,448	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 133893(T32AG058524)	Vanderbilt University	VUMC133893(T32AG058524)		\$15,483	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 135379 (R44AG074128)	Whiplash Technology, Inc.	VUMC135379 (R44AG074128)		\$52,033	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC 136199(R01AG088214-01)	Duke University	VUMC/R01AG088214-01		\$6,268	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC72190(RF1AG059869)	Johns Hopkins	VUMC72190(RF1AG059869)		(\$245,162)	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC75015(R01AG064800)	University of Washington	VUMC75015(R01AG064800)		\$30,030	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC75714(R24AG064025)	Northern California Institute for Research and Education	VUMC75714(R24AG064025)		\$32,697	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC78417(R33AG066543)	University of Southern California	VUMC78417(R33AG066543)		\$26,832	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC78764(R01AG066159)	University of Vermont and State Agricultural College	VUMC78764(R01AG066159)		\$442,559	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC79115(R01AG064950)	Vanderbilt University	VUMC79115(R01AG064950)		\$111,205	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC80631(R01AG064950)	Vanderbilt University	VUMC80631(R01AG064950)		\$6,666	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC82873(U19AG065188)	Duke Clinical Research Institute	VUMC82873(U19AG065188)		\$60,887	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC83142(R01AG059417)	California Pacific Medical Center Research Institute	VUMC83142(R01AG059417)		\$29,186	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC84035(U19AG065188)	Duke University	VUMC84035(U19AG065188)		\$54,163	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC84495(P01AG027296)	Brown University	VUMC84495(P01AG027296)		\$22,040	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC84924(R01AG062685)	Vanderbilt University	VUMC84924(R01AG062685)		\$14,355	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC86263(R01AG054029)	University of Southern California	VUMC86263(R01AG054029)		(\$2,430)	\$45,717,301	Research and Development	\$559,144,589

VANDERBILT UNIVERSITY MEDICAL CENTER
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Fiscal Period 7/1/2024 - 6/30/2025

Federal Awarding Agency/Program Title	Assistance Listing Number	Additional Award Identification (Optional)	Name of Funder Pass-Through Entity	Identifying Number Assigned By Funder Pass-Through Entity	Total Amount Provided to Sub-Recipients	Federal Expenditures	Federal Program Total	Cluster Name	Cluster Total
AGING RESEARCH	93.866	VUMC86269(R01AG061848)	University of Southern California	VUMC86269(R01AG061848)		\$58,384	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC86973(R01AG061325)	University of Tennessee Health Sciences Center	VUMC86973(R01AG061325)		\$88,335	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC87263(R33AG066543)	University of Southern California	VUMC87263(R33AG066543)		\$83,373	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC87897(U01AG068057)	University of Southern California	VUMC87897(U01AG068057)		\$44,180	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC91810(U19AG063911)	Mayo Clinic Hospital	VUMC91810(U19AG063911)		\$343,100	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC93653	Vanderbilt University	VUMC93653		\$439,405	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC96005(R21AG072101)	University of Vermont and State Agricultural College	VUMC96005(R21AG072101)		\$7,209	\$45,717,301	Research and Development	\$559,144,589
AGING RESEARCH	93.866	VUMC97851(R01AG059729)	University of Michigan	VUMC97851(R01AG059729)		\$106,838	\$45,717,301	Research and Development	\$559,144,589
VISION RESEARCH	93.867	1R01EY036002-01A1				\$208,940	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	1R01EY036252-01				\$493,604	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	1R21EY032724-01				(\$8,022)	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	1R21EY037409-01				\$17,180	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	2P30EY008126-37			\$249,222	\$668,344	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	3R01EY013760-17				\$688,453	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	5K08EY029006-05				\$0	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	5K08EY032620-04				\$135,762	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	5P30EY008126-36			\$86,252	\$72,891	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	5R01EY020894-13			\$2,427	\$496,275	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	5R01EY023397-10				\$6,068	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	5R01EY024373-08				\$539,618	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	5R01EY024997-09				\$470,236	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	5R01EY027746-05				\$0	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	5R01EY028133-05			\$102,212	\$124,215	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	5R01EY029693-05				\$151,390	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	5R01EY031315-05				\$522,629	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	5R01EY036258-02			\$166,672	\$404,237	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	5R01EY036473-02				\$345,945	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	5R21EY033473-02				\$46,678	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	5R21EY034313-02				\$129,229	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	5U24EY029893-05			\$161,678	\$149,312	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	5U24EY035075-02				\$626,215	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	VUMC (R01EY029298)	Illinois Institute of Technology	VUMC (R01EY029298)		\$6,824	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	VUMC103550(UG1EY033293)	Johns Hopkins University School of Medicine	VUMC103550(UG1EY033293)		\$46,624	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	VUMC106408(UG1EY014231)	Jaeb Center for Health Research	VUMC106408(UG1EY014231)		\$28,463	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	VUMC115799(UG1EY011751)	Jaeb Center for Health Research	VUMC115799(UG1EY011751)		\$21,547	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	VUMC117215(R44EY028058)	Human Cell Co	VUMC117215(R44EY028058)		\$347,795	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	VUMC123736(UG1EY011751)(VUMC7058 Master)	Jaeb Center for Health Research	VUMC123736(UG1EY011751)(VUMC7058 Master)		\$20,039	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	VUMC127290(R34EY036753)	Human Cell Co	VUMC127290(R34EY036753)		\$53,920	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	VUMC128303(R43EY036298)	Human Cell Co	VUMC128303(R43EY036298)		\$65,968	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	VUMC71183(U24EY029903)	Stanford University	VUMC71183(U24EY029903)		\$90,954	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	VUMC73899(UG1EY028091)	Johns Hopkins University School of Medicine	VUMC73899(UG1EY028091)		\$7,392	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	VUMC80459(R01EY030490)	Vanderbilt University	VUMC80459(R01EY030490)		\$98,079	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	VUMC86500(U54EY032442)	Vanderbilt University	VUMC86500(U54EY032442)		\$48,751	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	VUMC89460(R01EY031769)	Vanderbilt University	VUMC89460(R01EY031769)		\$56,303	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	VUMC93134(R01EY032670)	Vanderbilt University	VUMC93134(R01EY032670)		\$57,668	\$7,277,496	Research and Development	\$559,144,589
VISION RESEARCH	93.867	VUMC94842(UG1EY031651)	University of Pittsburgh	VUMC94842(UG1EY031651)		\$37,970	\$7,277,496	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	1K99LM014428-01A1				\$67,726	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	5K99LM014429-02				\$73,200	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	5R00LM014097-03				\$239,954	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	5R01LM010685-13				\$20,966	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	5R01LM012854-04				\$70	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	5R01LM013995-02			\$10,926	\$166,065	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	5R21LM013807-02				\$23,710	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	7R01LM012964-04				\$232,909	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	VUMC104026(T15LM007450)	Vanderbilt University	VUMC104026(T15LM007450)		\$5,147	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	VUMC104848(T15LM007450)	Vanderbilt University	VUMC104848(T15LM007450)		\$61,572	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	VUMC107048(R25LM014216)	Meharry Medical College	VUMC107048(R25LM014216)		\$40,660	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	VUMC111788(R01LM013712)	Yale University	VUMC111788(R01LM013712)		\$33,633	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	VUMC114559(T15LM007450)	Vanderbilt University	VUMC114559(T15LM007450)		\$59,815	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	VUMC115638(R01LM014199)	Ohio State University	VUMC115638(R01LM014199)		\$166,511	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	VUMC120440(T15LM007450)	Vanderbilt University	VUMC120440(T15LM007450)		\$66,224	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	VUMC127922(T15LM007450)	Vanderbilt University	VUMC127922(T15LM007450)		\$53,942	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	VUMC135293(DP1-LM-014558)	University of Pennsylvania	VUMC135293(DP1-LM-014558)		\$18,728	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	VUMC62581(T15LM007450)	Vanderbilt University	VUMC62581(T15LM007450)		\$6,923	\$1,352,195	Research and Development	\$559,144,589
MEDICAL LIBRARY ASSISTANCE	93.879	VUMC96199(R01LM012806)	University of Texas Health Sciences Center at Houston	VUMC96199(R01LM012806)		\$14,440	\$1,352,195	Research and Development	\$559,144,589
PRIMARY CARE TRAINING AND ENHANCEMENT	93.884	VUMC90245(T0BHP33102)	Meharry Medical College	VUMC90245(T0BHP33102)		\$24,258	\$24,258	N/A	\$0
CANCER PREVENTION AND CONTROL PROGRAMS FOR STATE, TERRITORIAL AND TRIBAL ORGANIZATIONS	93.898	VUMC66089	Tennessee Department of Health Services	VUMC66089	\$33,750	\$115,762	\$115,762	N/A	\$0
RURAL HEALTH CARE SERVICES OUTREACH, RURAL HEALTH NETWORK DEVELOPMENT AND SMALL HEALTH CARE PROVIDER QUALITY IMPROVEMENT	93.912	VUMC132811 (G28RH46307)	University of Mississippi Medical Center	VUMC132811 (G28RH46307)		\$144,562	\$144,562	N/A	\$0
HIV EMERGENCY RELIEF PROJECT GRANTS	93.914	VUMC55315	Metropolitan Nashville & Davidson County	VUMC55315		\$835,781	\$835,781	N/A	\$0
HIV CARE FORMULA GRANTS	93.917	VUMC39267(Ryan White Part B)(Edison ID 87169)	Tennessee Department of Health Services	VUMC39267(Ryan White Part B)(Edison ID 87169)		\$836,827	\$836,827	N/A	\$0
GRANTS TO PROVIDE OUTPATIENT EARLY INTERVENTION SERVICES WITH RESPECT TO HIV DISEASE	93.918	6H76HA30761-09-03				\$767,832	\$767,832	N/A	\$0
HIV DEMONSTRATION, RESEARCH, PUBLIC AND PROFESSIONAL EDUCATION PROJECTS	93.941	5U01PS005240-04			\$623,372	\$833,062	\$833,062	Research and Development	\$559,144,589
COOPERATIVE AGREEMENTS TO SUPPORT STATE-BASED SAFE MOTHERHOOD AND INFANT HEALTH INITIATIVE PROGRAMS	93.946	5NU58DP007307-03-00				\$242,404	\$271,939	N/A	\$0
COOPERATIVE AGREEMENTS TO SUPPORT STATE-BASED SAFE MOTHERHOOD AND INFANT HEALTH INITIATIVE PROGRAMS	93.946	5NU58DP007307-03-00				\$29,535	\$271,939	N/A	\$0
BLOCK GRANTS FOR COMMUNITY MENTAL HEALTH SERVICES	93.958	VUMC116403				\$90,573	\$90,573	N/A	\$0
PPHF GERIATRIC EDUCATION CENTERS	93.969	4U1QHP33085-05-06			\$152,832	\$156,297	\$367,007	N/A	\$0
PPHF GERIATRIC EDUCATION CENTERS	93.969	VUMC127250 (U1QHP53068)	Vanderbilt University	VUMC127250 (U1QHP53068)		\$210,710	\$367,007	N/A	\$0
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	3D43TW009337-11S2				(\$11,951)	\$1,564	Research and Development	\$559,144,589
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	5D43TW011544-05				\$111,837	\$298,224	Research and Development	\$559,144,589
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	5D43TW011949-04				\$118,014	\$179,136	Research and Development	\$559,144,589
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	5D43TW012268-04				\$41,728	\$258,453	Research and Development	\$559,144,589
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	5D43TW012468-03				\$118,097	\$236,262	Research and Development	\$559,144,589
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	5D43TW012727-02				\$79,475	\$203,780	Research and Development	\$559,144,589
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	5D43TW012750-02				\$53,610	\$257,184	Research and Development	\$559,144,589

VANDERBILT UNIVERSITY MEDICAL CENTER
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Fiscal Period 7/1/2024 - 6/30/2025

Federal Awarding Agency/Program Title	Assistance Listing Number	Additional Award Identification (Optional)	Name of Funder Pass-Through Entity	Identifying Number Assigned By Funder Pass-Through Entity	Total Amount Provided to Sub-Recipients	Federal Expenditures	Federal Program Total	Cluster Name	Cluster Total
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	5G11TW011819-03			\$5,941	\$17,257	\$2,136,725	Research and Development	\$559,144,589
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	5R21TW011327-02			\$7,237	\$9,870	\$2,136,725	Research and Development	\$559,144,589
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	5R21TW012635-02			\$67,649	\$155,212	\$2,136,725	Research and Development	\$559,144,589
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	5R25TW012715-02			\$71,757	\$252,791	\$2,136,725	Research and Development	\$559,144,589
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	5U2RTW011248-04				\$58	\$2,136,725	Research and Development	\$559,144,589
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	VUMC111538(U2RTW011248)	Tulane University	VUMC111538(U2RTW011248)		(\$60)	\$2,136,725	Research and Development	\$559,144,589
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	VUMC112100(D43TW009745)	Tulane University	VUMC112100(D43TW009745)		\$14,687	\$2,136,725	Research and Development	\$559,144,589
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	VUMC116123(R21TW012644)	LES CENTRES GHESKIO	VUMC116123(R21TW012644)		\$19,327	\$2,136,725	Research and Development	\$559,144,589
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	VUMC122527(D43TW011248)	Tulane University	VUMC122527(D43TW011248)		\$13,435	\$2,136,725	Research and Development	\$559,144,589
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	VUMC132256(D43TW009744-10S1)	University of Zambia	VUMC132256(D43TW009744-10S1)		\$53,922	\$2,136,725	Research and Development	\$559,144,589
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	VUMC63949(D43TW010559)	University of Cape Town	VUMC63949(D43TW010559)		\$41,333	\$2,136,725	Research and Development	\$559,144,589
INTERNATIONAL RESEARCH AND RESEARCH TRAINING	93.989	VUMC95340(D43TW009744)	University of Zambia	VUMC95340(D43TW009744)		\$124,290	\$2,136,725	Research and Development	\$559,144,589
MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT TO THE STATES	93.994	VUMC04734(Edison ID 78300)				\$236,632	\$995,713	N/A	\$0
MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT TO THE STATES	93.994	VUMC06072(Edison ID: 82876)	State of Tennessee	VUMC06072(Edison ID: 82876)		\$759,081	\$995,713	N/A	\$0
AUTISM AND OTHER DEVELOPMENTAL DISABILITIES, SURVEILLANCE, RESEARCH, AND PREVENTION	93.998	5NUR3DD000107-03				\$805,877	\$805,877	N/A	\$0
Department of Health and Human Services	93.RD	75D30121C10094				(\$10,880)	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC				\$65,384	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC103743(75N91019D00024/75N91020F00025)	Leidos Biomedical Research, Inc.	VUMC103743(75N91019D00024/75N91020F00025)	\$60,535	\$78,529	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC105199			\$11,900,761	\$16,863,682	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC105465(75N91019D00024)	Leidos Biomedical Research, Inc.	VUMC105465(75N91019D00024)		\$71,351	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC106140(75D30122C13330)	Boston Childrens Hospital	VUMC106140(75D30122C13330)		\$158,326	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC106816(75D30121C10166)	Denver Health and Hospital Authority	VUMC106816(75D30121C10166)		\$44,913	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC107497(U24HL157560)	National Marrow Donor Program (BeTheMatch Foundation)	VUMC107497(U24HL157560)		\$1,721	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC108487(75D30122C13330)	Boston Childrens Hospital	VUMC108487(75D30122C13330)		\$86,274	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC108939(Master VUMC86922)(75F40119D10037)(75F40119F19002)(WO2020)	Harvard Pilgrim Health Care	VUMC108939(Master VUMC86922)(75F40119D10037)(75F40119F19002)(WO2020)	\$6,175	\$12,765	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC114252(Master VUMC86922)(75F40119D10037/7540119F19002)(WO2018)	Harvard Pilgrim Health Care	VUMC114252(Master VUMC86922)(75F40119D10037/7540119F19002)(WO2018)		\$13,627	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC114797(75N93019D00031)	Johns Hopkins University School of Medicine	VUMC114797(75N93019D00031)		\$475,603	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC114806(23PPA-DM0013)	Leidos Biomedical Research, Inc.	VUMC114806(23PPA-DM0013)		\$8,887	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC114853(75N98019D00018)	American College of Radiology	VUMC114853(75N98019D00018)		\$23,633	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC115027(75N91019D00024-75N91020F00003)	University of Pittsburgh	VUMC115027(75N91019D00024-75N91020F00003)		\$15,731	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC116136(75A50123C00042)	The Charles Stark Draper Laboratory, Inc.	VUMC116136(75A50123C00042)		\$37,286	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC116587(75D30123D17951)				\$1,145,991	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC117667(75A50123C00047)	University of Pittsburgh	VUMC117667(75A50123C00047)		\$88,816	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC117701(75N91019D00024)	Leidos Biomedical Research, Inc.	VUMC117701(75N91019D00024)		\$948,615	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC118160(22X099)	Vanderbilt University	VUMC118160(22X099)		\$5,617	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC119843 (75N92022D00015-75N92022F00003)	Cepheid	VUMC119843 (75N92022D00015-75N92022F00003)		\$41,202	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC120979(Master VUMC86922)(WO2024)(75F40119D10037)	Harvard Pilgrim Health Care	VUMC120979(Master VUMC86922)(WO2024)(75F40119D10037)		\$4,760	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC122752(NHLBI Contract)	Westat, Inc.	VUMC122752(NHLBI Contract)		\$25,707	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC126750(Master VUMC86922)(WO2026)	Harvard Pilgrim Health Care	VUMC126750(Master VUMC86922)(WO2026)		\$67,227	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC127244(75N93024C00072)			\$148,271	\$806,556	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC127715(75D30121D12778)	Washington University	VUMC127715(75D30121D12778)		\$1,452,090	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC129881(Master VUMC85508)(WO1105)(75F40119D10037/75F40119F19001)	Harvard Pilgrim Health Care	VUMC129881(Master VUMC85508)(WO1105)(75F40119D10037/75F40119F19001)		\$49,108	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC130315(75D30122D15430 - Task 75D30122F00001)	Harvard Pilgrim Health Care	VUMC130315(75D30122D15430 - Task 75D30122F00001)		\$14,688	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC130347(NU38PW000002)	The Task Force for Global Health	VUMC130347(NU38PW000002)		\$7,481	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC130363(1AY2AX000077)				\$1,126,540	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC131540(D24AC00415)	Vanderbilt University	VUMC131540(D24AC00415)		\$95,077	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC133648(Master VUMC86922)(WO1106)(75F40119D10037/75F40119F19002)	Harvard Pilgrim Health Care	VUMC133648(Master VUMC86922)(WO1106)(75F40119D10037/75F40119F19002)		\$53,269	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC134256(75N92024D00008)	University of Michigan	VUMC134256(75N92024D00008)		\$106,377	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC135515	Leidos Biomedical Research, Inc.	VUMC135515		\$11,805	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC136558(75N91019D00024)(22X099)	Vanderbilt University	VUMC136558(75N91019D00024)(22X099)		\$2,251	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC136559(75N91019D00024)	Vanderbilt University	VUMC136559(75N91019D00024)		\$6,052	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC137377(Master VUMC42957)(TO13)	Duke University	VUMC137377(Master VUMC42957)(TO13)		\$14,784	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC78931(75N93019C00074)			\$670,412	\$2,204,932	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC93226(75D30121C11656)				(\$6,965)	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.RD	VUMC96364(75N93020C00027)	IDBiologics, LLC	VUMC96364(75N93020C00027)		\$993	\$26,219,805	Research and Development	\$559,144,589
Department of Health and Human Services	93.U01	VUMC94203	RAND Corporation, Headquarters	VUMC94203		\$44,138	\$44,138	N/A	\$0
TOTAL DEPARTMENT OF HEALTH AND HUMAN SERVICES					\$129,875,019	\$593,093,456			
FEDERAL EMERGENCY MANAGEMENT AGENCY DISASTER GRANTS - PUBLIC ASSISTANCE (PRESIDENTIALLY DECLARED DISASTERS)	97.036	FEMA-4514-DR-TN (Edison ID 66504-52241)	Department of Military, Tennessee Emergency Management Agency	FEMA-4514-DR-TN (Edison ID 66504-52241)		\$9,857,313	\$9,857,313	N/A	\$0
TOTAL FEDERAL EMERGENCY MANAGEMENT AGENCY					\$0	\$9,857,313			
U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT USAID FOREIGN ASSISTANCE FOR PROGRAMS OVERSEAS	98.001	VUMC95441(7200AA21CA00010)	Yale University	VUMC95441(7200AA21CA00010)		\$158,765	\$158,765	N/A	\$0
TOTAL U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT						\$158,765			
TOTAL EXPENDITURE OF FEDERAL AWARDS					\$135,520,605	\$640,397,319			

Please Note:
Italicized award lines indicate pass-through funding

The accompanying Notes to the Schedule of Expenditures of Federal Awards are an integral part of the schedule.

VANDERBILT UNIVERSITY MEDICAL CENTER
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS AND STATE FINANCIAL ASSISTANCE
Fiscal Period 7/1/2024 - 6/30/2025

Federal Awarding Agency/Program Title	Assistance Listing Number	Additional Award Identification	Name of Funder Pass-Through Entity	Identifying Number Assigned By Funder Pass-Through Entity	Total Amount Provided to Sub-Recipients	Federal Expenditures	Federal Program Total	Cluster Name	Cluster Total
TOTAL EXPENDITURE OF FEDERAL AWARDS					\$135,520,605	\$640,397,319			
STATE FINANCIAL ASSISTANCE									
62967.MED-ASSISTED TREATMENT SERVICES				62967.MED-ASSISTED TRT		\$1,307			
PSYLTDHDDFET MW				6442.STTN BOP		\$106,398			
DOC (BOP) RISK ASSESSMENTS				6442.STTN BOP		\$156,515			
COMMUNITY FORENSIC-JUV CT EVALUATIONS				6442.STTN CFJCE		\$2,650			
75756.COMPREHENSIVE CARE CLINIC FOR STATE APPROVED CLIENTS				75756.ST TN		\$105,230			
34001-99205.CLOVER BOTTOM NEUROLOGY SPASTICITY CLINICS				34001-9925.ST TN		\$14,193			
74876.TENNESSEE INTEGRATED COURT SCREENING AND REFERRAL PROJ				74876.ST TN		\$95,645			
74585.SAFE BABY COURTS-STATE				74585.ST TN		\$66,962			
65891.GENETIC SCREENING, TESTING, COUNSELING-STATE FUND				65891.ST TN		\$751,900			
INTERNAL CAR SEAT PROGRAM				STATE OF TENNESSEE		\$4,335			
80162: (Program Innovation) TRIAD Consultation Services				80162: ST TN		\$531,727			
81216:QUALITY IMPROVEMENT AND DATA MANAGEMENT (QIDM)				81216:ST TN		\$57,691			
81215.RedCAP DATA ANALYSIS				81215:ST TN		\$18,918			
80847.BEHAVIORAL HEALTH INFRASTRUCTURE				80847:ST TN		\$1,440,396			
82873.ASSESSMENT MANAGEMENT RPP#35910-10580				82873:ST TN	\$7,749	\$3,835,418			
EXPANDING POTENTIAL ACCESS TO DOULAS FOR TENNCARE				295171:ST TN		\$83,200			
SUPPORT AND HEALING FOR INFANTS WITH ANTE/NEONATAL EXPOSURES (SHINE)				85102:ST TN		\$378,374			
MANAGEMENT OF OPIOID USE DISORDER FOR MEDICALLY ACUTE PATIENTS				84911:ST TN		\$234,537			
TENNESSEE ADDICTION PSYCHIATRY RESEARCH FELLOWSHIP IN OPIOID USE DISORDER				83853:ST TN		\$124,245			
MAMA LERE DHS ENHANCEMENT 2024				STATE OF TENNESSEE		\$4,000			
PROVIDING ACCESS TO THE VISUAL ENVIRONMENT (PAVE) PROGRAM				77577:ST TN		\$355,000			
FIREFLY SYNCHRONOCITY: SPREADING EVIDENCE-BASED INTERVENTION FOR MOMS and BABIES AFFECTED BY OUD				84515:ST TN	\$24,290	\$547,955			
TOTAL STATE FINANCIAL ASSISTANCE					\$32,039	\$8,916,596			
TOTAL EXPENDITURE OF FEDERAL AWARDS AND STATE FINANCIAL ASSISTANCE					\$135,552,644	\$649,313,915			

Please Note:
The accompanying Notes to the Schedule of Expenditures of Federal Awards and State Financial Assistance are an integral part of the schedule.

Vanderbilt University Medical Center

Notes to the Schedule of Expenditures of Federal Awards and State Financial Assistance

For the Year Ended June 30, 2025

1. Significant Accounting Policies Used in Preparing the Schedule of Expenditures of Federal Awards and State Financial Assistance

The accompanying Schedule of Expenditures of Federal Awards and State Financial Assistance (the Schedule) includes the activity of Vanderbilt University Medical Center (VUMC) under programs of the federal government and of the State of Tennessee for the year ended June 30, 2025. The information in the Schedule is presented in accordance with the requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance) and the State of Tennessee Audit Manual. For purposes of the Schedule, federal and state awards include all grants, contracts, and similar agreements entered into directly between VUMC and agencies and departments of the federal government and all subawards to VUMC by organizations pursuant to federal grants, contracts, and similar agreements, and agencies and departments of the Tennessee state government, including federal awards passed through by the state of Tennessee.

2. De Minimis Cost Rate

VUMC did not use the de minimis cost rate.

3. Summary of Significant Accounting Policies for the Schedule

For purposes of the Schedule, expenditures for federal and state programs are recognized on the accrual basis, which is consistent with accounting principles generally accepted in the United States of America. Expenditures for federal and state awards of VUMC are determined using the cost accounting principles and procedures set forth in the Uniform Guidance and the State of Tennessee Audit Manual. Under these cost principles, certain expenditures are not allowable or are limited as to reimbursement. Negative amounts represent adjustments or credits made in the normal course of business to amounts reported as expenditures in prior years.

4. Disaster Grants – Public Assistance (Presidentially Declared Disasters) For the Federal Emergency Management Agency (FEMA) (Assistance Listing 97.036)

VUMC incurred expenditures in fiscal years 2020, 2021, and 2022 related to three project worksheets; however, FEMA did not obligate the project worksheets until fiscal year 2025. As a result, all Assistance Listing Number 97.036 federal expenditures reported in the Schedule for the year ended June 30, 2025, were incurred in prior years.

Uniform Guidance Reports and Schedule



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Report of Independent Auditors on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards*

Senior Management and the Board of Directors
Vanderbilt University Medical Center

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States (*Government Auditing Standards*), the consolidated financial statements of Vanderbilt University Medical Center (VUMC), which comprise the consolidated balance sheet as of June 30, 2025, and the related consolidated statements of operations, changes in net assets and cash flows for the year then ended, and the related notes (collectively referred to as the “financial statements”), and have issued our report thereon dated September 30, 2025.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered VUMC’s internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of VUMC’s internal control. Accordingly, we do not express an opinion on the effectiveness of VUMC’s internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity’s financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses or significant deficiencies may exist that were not identified.



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Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether VUMC's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of This Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Ernst & Young LLP

September 30, 2025



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Report of Independent Auditors on Compliance for Each Major Federal Program and Report on Internal Control Over Compliance Required by the Uniform Guidance

Senior Management and the Board of Directors
Vanderbilt University Medical Center

Report of Independent Auditors on Compliance for Each Major Federal Program

Opinion on Each Major Federal Program

We have audited Vanderbilt University Medical Center's (VUMC) compliance with the types of compliance requirements identified as subject to audit in the U.S. Office of Management and Budget (OMB) *Compliance Supplement* that could have a direct and material effect on each of VUMC's major federal programs for the year ended June 30, 2025. VUMC's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, VUMC complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2025.

Basis for Opinion on Each Major Federal Program

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America (GAAS); the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States (*Government Auditing Standards*); and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of VUMC and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion on compliance for each major federal program. Our audit does not provide a legal determination of VUMC's compliance with the compliance requirements referred to above.

Responsibilities of Management for Compliance

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to VUMC's federal programs.



Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on VUMC's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material, if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about VUMC's compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding VUMC's compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of VUMC's internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of VUMC's internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

Other Matters

The results of our auditing procedures disclosed an instance of noncompliance, which is required to be reported in accordance with the Uniform Guidance and which is described in the accompanying schedule of findings and questioned costs as follows:

Finding No.	Assistance Listing No.	Program (or Cluster) Name	Compliance Requirement
2025-001	93.110	Maternal and Child Health Federal Consolidated Programs	L. Reporting

Our opinion on the major federal program is not modified with respect to this matter.



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Government Auditing Standards requires the auditor to perform limited procedures on VUMC's response to the noncompliance finding identified in our audit described in the accompanying schedule of findings and questioned costs. VUMC's response was not subjected to the other auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

Report on Internal Control Over Compliance

Our consideration of internal control over compliance was for the limited purpose described in the Auditor's Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance, and therefore, material weaknesses or significant deficiencies may exist that were not identified. However, as discussed below, we did identify certain deficiencies in internal control over compliance that we consider to be material weaknesses.

A *deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct noncompliance with a type of compliance requirement of a federal program on a timely basis. A *material weakness in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected on a timely basis. We consider the deficiencies in internal control over compliance described in the accompanying schedule of findings and questioned costs as described below to be material weaknesses.

Finding No.	Assistance Listing No.	Program (or Cluster) Name	Compliance Requirement
2025-001	93.110	Maternal and Child Health Federal Consolidated Programs	L. Reporting
2025-002	97.036	COVID-19 Disaster Grants – Public Assistance (Presidentially Declared Disasters)	A. Activities Allowed or Unallowed B. Allowable costs/ Cost Principles H. Period of Performance L. Reporting

A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

Government Auditing Standards requires the auditor to perform limited procedures on VUMC's response to the internal control over compliance findings identified in our audit described in the accompanying



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schedule of findings and questioned costs. VUMC's response was not subjected to the other auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Ernst + Young LLP

March 4, 2026

Vanderbilt University Medical Center

Schedule of Findings and Questioned Costs

For the Year Ended June 30, 2025

Section I—Summary of Auditor's Results**Financial Statements**

Type of report the auditor issued on whether the financial statements audited were prepared in accordance with GAAP:

Unmodified

Internal control over financial reporting:

Material weakness(es) identified? _____

yes X **no**

Significant deficiency(ies) identified? _____

yes X **none reported**

Noncompliance material to financial statements noted? _____

yes X **no**

Federal Awards

Internal control over major federal programs:

Material weakness(es) identified? X

yes _____ **no**

Significant deficiency(ies) identified? _____

yes X **none reported**

Type of auditor's report issued on compliance for major federal programs:

Unmodified

Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)?

 X **yes** _____ **no**

Identification of major federal programs:

Assistance Listing number(s)**Name of federal program or cluster**

Various
93.110

Research & Development Cluster
Maternal and Child Health Federal Consolidated
Programs

93.317
97.036

Emerging Infections Programs
COVID-19 Disaster Grants – Public Assistance
(Presidentially Declared Disasters)

Dollar threshold used to distinguish between Type A and Type B programs:

 \$ 3,000,000

Auditee qualified as low-risk auditee?

 X **yes** _____ **no**

Vanderbilt University Medical Center

Schedule of Findings and Questioned Costs (continued)

Section II—Financial Statement Findings

None noted.

Vanderbilt University Medical Center

Schedule of Findings and Questioned Costs (continued)

Section III—Federal Award Findings and Questioned Costs

2025–001 Transparency Act Reporting

Identification of the Federal Program	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA)	
	Maternal and Child Health Federal Consolidated Programs (MCH)	93.110
	Award: 5 T73MC30767-09 Award Year(s): 7/1/2024-6/30/2025	
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	2 CFR 200.303 requires that the non-Federal entity must “(a) establish, document and maintain effective internal control over the Federal award that provides reasonable assurance that the recipient or subrecipient is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should align with the guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States or the “Internal Control-Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).” Under the requirements of the Federal Funding Accountability and Transparency Act (Transparency Act) that are codified in 2 CFR Part 170, “unless the recipient is exempt as provided in paragraph d. of this award term, the recipient must report each subaward that equals or exceeds \$30,000 in Federal funds for a subaward to an entity or Federal agency. The recipient must also report a subaward if a modification increases the Federal funding to an amount that equals or exceeds \$30,000. All reported subawards should reflect the total amount of the subaward”. The recipient must report each subaward described to the Federal Funding Accountability and Transparency Act Subaward Reporting System (FSRS) no later than the end of the month following the month in which the subaward was issued.	
Condition:	During our audit, we noted 3 Federal Funding Accountability and Transparency Act (FFATA) reports, for the subaward modifications made during fiscal year 2025, were not submitted in the FSRS/SAM.gov timely.	
Cause:	Vanderbilt University Medical Center (VUMC) did not have sufficient internal controls to ensure that the required FFATA reports were submitted timely.	

Vanderbilt University Medical Center

Schedule of Findings and Questioned Costs (continued)

Effect or Potential Effect:	VUMC did not submit the necessary FFATA reports under the MCH project for each first-tier subaward modifications in FSRS/SAM.gov and consequently was not in compliance with the requirements under the Transparency Act.
Questioned Costs:	\$0
Context:	Under the MCH program, there were five subrecipients that had a total of five subaward modifications in FY 2025. The three subaward modifications for which FFATA reports were not submitted timely totaled \$33,853. Upon eventual submission, we did not identify any errors in the data reported. Total subrecipient's costs are \$326,025 in FY 2025. The total federal expenditures for the MCH program for FY 2025 were \$5,760,179.
Identification as a Repeat Finding:	This is not a repeat finding.
Recommendation:	We recommend management strengthen its internal controls and procedures over the review of subrecipient awards and modifications to ensure the required FFATA reports are submitted timely to be in compliance with the Federal Transparency Act.
Views of Responsible Officials:	Management agrees with the finding and has strengthened our internal controls and procedures to ensure required FFATA reports are submitted timely in compliance with the Federal Transparency Act.

Vanderbilt University Medical Center

Schedule of Findings and Questioned Costs (continued)

2025-002 Activities Allowed/Unallowed, Allowable Costs/Cost Principles, Period of Performance and Reporting

Identification of the Federal Program	Federal Agency and Program Name	Assistance Listing #
	Department of Homeland Security COVID-19 Disaster Grants – Public Assistance (Presidentially Declared Disasters) (FEMA) Pass-Through Entity: State of Tennessee Award: All FEMA Projects (Projects 435263, 550461, 684580) Award Year(s): Project 435263: 1/1/2020-7/31/2021 Project 550461: 1/1/2020-7/31/2021 Project 684580: 8/1/2020-6/30/2022	97.036
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	2 CFR 200.303 requires that the non-Federal entity must “(a) establish, document and maintain effective internal control over the Federal award that provides reasonable assurance that the recipient is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should align with the guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States or the “Internal Control - Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”	
Condition:	Management did not retain documentation over their review and approval of FEMA expenditures prior to submission in the FEMA Portal.	
Cause:	Management represented that FEMA expenditures were reviewed and approved prior to submission; however, supporting documentation over the review and approval was not maintained.	
Effect or Potential Effect:	Unallowable expenditures could have been charged to the federal program.	
Questioned Costs:	\$0.	

Vanderbilt University Medical Center

Schedule of Findings and Questioned Costs (continued)

Context:	There were three project worksheets obligated in FY2025. Management did not maintain documentation over the review and approval over the expenditures submitted to the FEMA . We selected 40 expenditures charged to FEMA, noting no instances of non-compliance. Total FEMA expenses reported on the SEFA for the year ended June 30, 2025, is \$9,857,313.
Identification as a Repeat Finding:	This is not a repeat finding.
Recommendation:	We recommend Management ensure that appropriate documentation be retained over the review and approval of FEMA expenditures.
Views of Responsible Officials:	Management understands that additional audit evidence must be retained at a detailed enough level to allow the auditor to meet their reperformance standard. All expenses claimed were eligible and were reviewed by management prior to the submission. The control issue identified is due to the lack of evidence to support approval. Should management have a future FEMA claim we will retain additional audit evidence to enable auditor reperformance of the controls regarding approval of expenditures.

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VUMC Finance

Management's Corrective Action Plan

For the Year Ended June 30, 2025

Finding 2025-001

Federal Program:	U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA)
Assistance Listing:	93.110
Federal Agency:	Maternal and Child Health Federal Consolidated Programs (MCH)
Grant Award Number:	5 T73MC30767-09
Award Period:	7/1/2024-6/30/2025

Management agrees with the finding and has strengthened our internal controls and procedures to ensure required FFATA reports are submitted timely in compliance with the Federal Transparency Act.

Paula Yarbrough, VUMC Director – Grants and Contracts will be responsible for the implementation by fiscal year-end 2026.

Finding 2025-002

Federal Program:	Department of Homeland Security
Assistance Listing:	97.036
Federal Agency:	COVID-19 Disaster Grants – Public Assistance (Presidentially Declared Disasters) (FEMA)
Pass-Through Entity:	State of Tennessee
Grant Award Number:	All FEMA Projects (Projects 435263, 550461, 684580)
Award Period:	Project 435263: 1/1/2020-7/31/2021 Project 550461: 1/1/2020-7/31/2021 Project 684580: 8/1/2020-6/30/2022

Management understands that additional audit evidence must be retained at a detailed enough level to allow the auditor to meet their reperformance standard. All expenses claimed were eligible and were reviewed by management prior to the submission. The control issue identified is due to the lack of evidence to support approval. Should management have a future FEMA claim we will retain additional audit evidence to enable auditor reperformance of the controls regarding approval of expenditures.

Paula Yarbrough, VUMC Director – Grants and Contracts will be responsible for the implementation by fiscal year-end 2026.



**Summary Schedule of Prior Year Audit Findings
For The Year Ended June 30, 2025**

Finding 2024-001

Federal Agency: United States Department of Health and Human Services (HHS) – Health Resources and Services Administration (HRSA)
Assistance Listing No: 93.145
Grant Award Number: 6 U1OHA30535-08-01
Award Periods: July 1, 2023 through June 30, 2024
Pass-Through Agency: Columbia University
Grant Award Number: U1SHA46532
Award Periods: September 1, 2023 through August 31, 2024

Department of Health and Human Services – Health Resources and Services Administration (HRSA) updated the award template utilizing a new federal format. Modification of this federal award template has allowed HRSA to indicate/flag (item 18 in the Notice of Grant Award - R&D “no”) whether the federal program is R&D in a manner not previously recorded or visible. This indicator flag now indicates AETC is non-R&D, therefore, we have reflected it appropriately in the FY24 SEFA.

We will strengthen our controls for monitoring the cluster to ensure appropriate classification paying attention to any indications in the Notice of Grant Award.

Paula Yarbrough, VUMC Director – Grants and Contract will be responsible for the implementation by fiscal year-end 2025.

Status: VUMC strengthened our controls for monitoring clusters to ensure appropriate classifications per the Notice of Grant Awards.

Finding 2023-001

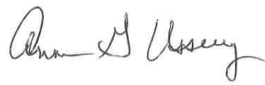
Federal Grantor: United States Department of Health and Human Services (HHS)
Research & Development Cluster

Assistance Listing No.: 93.110, 93.113, 93.121, 93.172, 93.242, 93.279, 93.389, 93.393, 93.394, 93.395, 93.396, 93.837, 93.846, 93.847, 93.849, 93.853, 93.855, 93.865, 93.RD.

VUMC did perform a physical inventory during fiscal year 2023, but our documentation did not adequately support the existence of all fixed assets. VUMC will improve the internal controls around our fixed asset physical inventory procedures by ensuring that we document the location and existence of all fixed assets ensuring completeness of the physical inventory performed and allowing for reperformance by our auditors. VUMC will also improve the documentation for disposals ensuring that the required criteria under section 200.313(e) are met and can be evidenced to allow for reperformance by our auditors.

Paula Yarbrough, VUMC Director – Grants and Contracts, will be responsible for implementation by fiscal year end 2024.

Status: Management began its implementation plans at the end of FY 2024 and new processes were put in place in FY 2025 over fixed asset inventory procedures.

Certificate of Insurance					Issue Date: 8/13/25	
Producer		Self Insurance Vanderbilt University Medical Center c/o Risk and Insurance Management 3322 West End Ave, Suite 1100 Nashville, TN 37203		This certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This certificate does not amend, extend or alter the coverage afforded by the policies below.		
Insured		Vanderbilt University Medical Center 3322 West End Ave, Suite 1100 Nashville, TN 37203		COMPANIES AFFORDING COVERAGE Company Letter A Vanderbilt Self Insured Trust Company Letter B Company Letter C Company Letter D		
Coverages						
This is to certify that policies of insurance listed below have been issued to the insured named above for the policy period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policies described herein are subject to all the terms, exclusions, and conditions of such policies. Limits shown may have been reduced by paid claims.						
Co Ltr.	Type of Insurance	Policy Number	Policy Effective Date	Policy Expiration Date	Limits	
A	☒ General Liability	Self-Insured Trust #43	07/01/2025	07/01/2026	General Aggregate	\$1,000,000
	☐ Commercial General Liability				Products-Comp/Op Aggr	\$1,000,000
	☐ Claims Made				Personal & Adv. Injury	\$1,000,000
	☒ Occurrence				Each Occurrence	\$1,000,000
	☐ Owner's & Contractor's Prot.				Med. Exp. (Any one person)	\$5,000
	Automobile Liability				Combined Single Limit	
	☐ Any Auto				Bodily Injury (Per person)	
	☐ All Owned Autos				Bodily Injury (Per accident)	
	☐ Scheduled Autos				Property Damage	
	☐ Hired Autos					
	☐ Non-Owned Autos					
	☐ Garage Liability					
	Excess Liability				Each Occurrence	
	☐ Umbrella Form				Aggregate	
	☐ Other than Umbrella Form					
	☐ Workers' Compensation and Employers' Liability				Statutory Limits	
					Employers Liability Per occurrence	
A	Other					
	☒ Professional Liability	Self-Insured Trust #43	07/01/2025	07/01/2026	\$1,000,000 per Occurrence Limit \$1,000,000 Aggregate Limit	
Description of Operations/Locations/Vehicles/Special Items						
Evidence of coverage for contract between Metro Public Health Department and Vanderbilt University Medical Center. The certificate holder is included as additional insured in regard to general liability coverage. The evidenced General liability insurance includes coverage for sexual abuse and molestation at the policy limit of \$1,000,000.						
Certificate Holder				Cancellation		
Metro Public Health Department Beverly Glaze-Johnson 2500 Charlotte Avenue Nashville, TN 37209				Should any of the above described policies be canceled before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the Certificate Holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.		
				Authorized Representative 		



CERTIFICATE OF LIABILITY INSURANCE

 DATE (MM/DD/YYYY)
08/14/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Willis Towers Watson Southeast, Inc. c/o 26 Century Blvd P.O. Box 305191 Nashville, TN 372305191 USA	CONTACT NAME: WTW Certificate Center PHONE (A/C, No, Ext): 1-877-945-7378 FAX (A/C, No): 1-888-467-2378 E-MAIL ADDRESS: certificates@wtwco.com														
INSURED Vanderbilt University Medical Center 3322 West End Ave, Suite 1100 Nashville, TN 37203	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> <tr> <td>INSURER A: Beazley Excess and Surplus Insurance Inc</td> <td>17520</td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Beazley Excess and Surplus Insurance Inc	17520	INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A: Beazley Excess and Surplus Insurance Inc	17520														
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INSURER E:															
INSURER F:															

COVERAGES**CERTIFICATE NUMBER: W40030348****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC ☐ OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB ☐ OCCUR EXCESS LIAB ☐ CLAIMS-MADE DED ☐ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? ☐ Y ☒ N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE ☐ OTH-ER ☐ E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Cyber Liability (Primary)			D2F6FB250501	07/01/2025	07/01/2026	Each Claim \$1,000,000 Aggregate \$1,000,000 Retention \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**
 Metro Public Health Department
 Attn: Beverly Glaze-Johnson
 2500 Charlotte Avenue
 Nashville, TN 37209

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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esr20986

Final Audit Report

2026-05-29

Created:	2026-05-29
By:	Amanda Lowe (amanda.j.lowe@vumc.org)
Status:	Signed
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