C#	SUBJECT	SUMMARY OF COMPLIANCE REQUIREMENT	■ COMPLIANT ▩ ON TRACK/IN PROGRESS ■ UNCERTAIN ■ NOT COMPLIANT
1	Surgical Pavilion Design and Construction	MGUH shall construct the Surgical Pavilion in accordance with the plans titled "Consolidated Further Processing Plans", prepared by Shalom Baranes Associates dated June 7, 2017, and marked as Exhibits 30A1-30A3 of the record. Since the Applicant will present the Project to OGB and/or CFA at the design stage, the Applicant shall have flexibility to make minor refinements to the design with respect to landscape elements and exterior details, locations, and dimensions, including curtainwall mullions and spandrels, window frames, doorways, glass types, belt courses, sills, bases, cornices, railings and trim; and any other similar changes to comply with any conditions of approval and comments from either OGB or CFA.	CFA approved the design in January 2018, and referred the project back to the Old Georgetown Board to complete future permit review. DDOT Public Space Committee granted concept approval for elements in public space in June 2018. DCRA approved the building permit submission in August 2019, and the approved building permit drawings were submitted to OGB and permit approval was received December 2019. Aesthetic mockups were constructed and reviewed by the Old Georgetown Board and the Commission of Fine Art's review in 2020. As reviewed and approved by the Hospital Construction Monitoring Group (HCMG), the sound attenuated batch plant was removed and excavation in former parking Lot B commenced in 2021. The construction permit application consistent with prior Public Space Committee Concept Approval for improvements along Reservoir Road in public space was submitted to DDOT in March 2022 and was issued November 2022.
2	Helicopter Flight Path	MGUH shall ensure that the routine flight path for helicopters will approach and depart the Hospital's helipad linearly from and towards the Potomac River over the center of the Georgetown University Campus. Safety considerations may, on rare occasions, require pilots to alter this path due to weather or other ambient situations. The helipad will be constructed with sound-baffling material using the best available technology. Helicopter noise monitoring in the neighborhood will take place at unannounced times at least twice a year in agreed-upon locations, or more frequently if off-route or noise issues develop. This condition is based on the expectation that helicopter flights to MGUH will not exceed an average of 1.5 flights per day.	MGUH anticipates that the helicopter flight plan will be consistent with Compliance Requirement #2 after the completion of the Medical Surgical Pavilion Project.
3	Emergency Department Facilities	MGUH shall ensure that the MGUH Emergency Department facilities will provide no more than 32 universal treatment bays and one sexual assault nurse examiner ("SANE") suite. MGUH will work with the GCP in requesting DC Fire and Emergency Management Systems ("FEMS") to adopt "quiet community" protocols to reduce ambulance siren usage in the neighborhood.	The Emergency Department program will provide NO MORE THAN 32 universal treatment bays and one sexual assault nurse examiner ("SANE") suite. MGUH will continue to work with the GCP in requesting DC Fire and Emergency Management Systems ("FEMS") to adopt "quiet community" protocols to reduce ambulance siren usage in the neighborhood.
4	Transportation Management	Compliance with Performance Target Commitment ▪ Cannot exceed 1,245 trips during AM peak/939 trips during PM peak Annual Transportation Performance Monitoring Study ▪ Vehicle trip generation ▪ Transportation survey ▪ GUTS ridership counts ▪ Summary of TDM efforts/expenditures ▪ Parking occupancy counts ▪ GUTS ridership tracking on quarterly basis during construction of the Surgical Pavilion ▪ Study shall be submitted to GCP and DDOT by December 31 of each year	As reported in the **Annual 2022 Transportation Performance Monitoring Report** submitted to DDOT and the GCP on December 16, 2022, the measured peak hour trips generated by MGUH for fall 2022 were 945 trips during the AM peak hour and 791 trips during the PM peak hour. The trip generation for both peak hours fell below both the Performance Target Commitments (1,245 AM peak hour trips/939 PM peak hour trips) and Aspirational Goals (1,153 AM peak hour trips/870 PM peak hour trips) as set forth in the Campus Plan and as modified by the subsequent approval of the Further Processing application for MedStar's new medical/surgical pavilion.
5	Electric Car Charging Stations	MGUH shall install two 240-volt electric car charging stations in the Surgical Pavilion parking garage. The car charging stations shall be installed prior to opening of the Surgical Pavilion.	MGUH shall install a minimum of two (2) 240-volt electric car charging stations in the Surgical Pavilion parking garage. The charging stations have been installed and will be available for use when the garage receives DOB Use and Occupancy approval.
6	Real Time Transit Information Screen	MGUH shall install a real-time transit information screen that is easily viewable from the main MGUH entrance or lobby and includes GUTS information, to be completed concurrently with the completion of the Surgical Pavilion.	A digital screen will be provided in the Pavilion lobby; the screen will display real-time transit information including GUTS information. The digital screen has been installed and will be available for use when the building lobby receives DOB Use and Occupancy approval.
7	Bike Routing and Wayfinding	MGUH shall provide bike routing and wayfinding information on the Surgical Pavilion wayfinding plan, to be completed concurrently with the completion of the Surgical Pavilion.	OGB and CFA reviewed a further detailed concept design related to the exterior site improvements, including wayfinding signage, during the January 2018 meeting. CFA approved the design and referred the project back to the Old Georgetown Board to complete future permit review. DOB approved the building permit submission in August 2019, and the approved building permit drawings were submitted to OGB for permit approval and approved December 2019. MGUH will continue to collaborate and coordinate with the University so that the bicycle routing and wayfinding information on the Pavilion

			wayfinding plans is consistent with Campus Wayfinding.
8	East-West Road (“New Road”)	As part of the Project, MGUH and the University shall construct a roadway running from east to west connecting Entrance 4 to the Leavey Garage (the "New Road"). During and after construction of the Surgical Pavilion, MGUH will not utilize Entrance 4 or the New Road for any construction related traffic (including employee shuttles and trucks), commercial vehicles, or services/deliveries. During and after construction, MGUH intends to use Entrance 4 and the New Road solely for vehicular transportation (i.e., patients, visitors, and employees traveling in cars). During construction, ambulances will continue to use Entrance 2, unless the use of a different entrance or the limited use of the road is necessary due to the particular urgent needs of a patient. Any change to MGUH's use of Entrance 4 or the New Road shall be permitted only if reviewed by and concurred to by the GCP, based on a demonstration that measures will be implemented to mitigate adverse impacts (e.g. noise, light, and air quality). The limitations on the University’s use of Entrance 4 are addressed in 2017 Campus Plan Condition 20(d).	The "New Road" (commonly referred to as the "East/West Road") project is substantially complete, providing connectivity between Entrance 4 and Lombardi Circle and Leavey Garage. Open to vehicular traffic in September 2019, the construction of the East West Road continued at a slower pace to accommodate traffic, underground obstructions and re-routing required in Lombardi Circle. Traffic signalization at Entrance 4 was completed in 2020 after PEPCO work and unforeseen subsurface electrical conditions were resolved. The remaining activity is tree planting in the central granite-edged circle which will have a large caliper tree planted in its center. MGUH is not using Entrance 4 or the New Road for construction related traffic. Any change to the use of Entrance 4 or the New Road shall be permitted only if concurred by the GCP. Ambulances continue to use Entrance 2 during construction of the Pavilion. Entrance 1 will open to vehicular traffic when the garage and Emergency Department receive DOB Use and Occupancy approval.
9	Construction Management Plan	Construction relating to the Project shall take place according to the written Construction Management Agreement and Plan between MGUH and the community representatives of the GCP, dated May 14, 2017 and marked as Exhibits 28A1-28A2 of the record, that incorporates the construction plan outline presented to the community representatives of the GCP on September 14, 2015. The agreement provides for no idling of trucks on Reservoir Road; off-site parking to replace on-site staff and visitor parking, such as the surface parking on Lots A and B, that will be unavailable during construction; environmental, noise and vermin controls to protect the community; communication procedures and records that maximize effective communication from and to the community during construction; at the completion of construction of the Project or during construction if need be, repair and resurfacing as needed of any part of Reservoir Road damaged by construction traffic; and a similar construction management plan to be in effect for back-fill and other on-campus construction relating to MGUH.	The Construction Employee Shuttle Plan, previously approved in 2017 and documented as part of prior compliance reporting, remains in effect during construction of the Pavilion. The Construction Management Agreement and Construction Management Plan stipulated the use of a sound attenuated batch plant (“batch plant”). The batch plant and associated temporary construction entrances to access the batch plant during Phase 1 concrete operations were approved and became operational in July of 2019 and operation of the batch plant continued throughout 2020. At the conclusion of Phase 1 concrete operations, the sound attenuated batch plant was removed and excavation in former parking Lot B commenced in 2021. In April 2019, the GCP formed the Hospital Construction Management Group (HCMG) to address day to day construction activities. The group, including community, University, and MGUH co-chairs, meet on a regularly scheduled basis. Standing agenda items for the meeting include the following monthly updates: noise monitoring, lateral movement monitoring, air monitoring, communication log, and 60-day construction look-ahead schedule. Other agenda items have included, but not limited to tower crane logistics, construction timeline updates, and oversize construction delivery permit process. The anticipated construction timeline which was estimated in the Construction Management Plan was updated and presented to the HCMG in September. During the remainder of 2021 the concrete batch plant was removed and excavation and structural work performed approximately three stories deep to support the green space and the underground parking garage in former Parking Lot B. Through 2023, the remaining exterior of the Pavilion has been completed with entrance vestibules, canopies, and green roofs. Work also continued on the inside of the Pavilion to build out the patient care and support service areas as well as landscaping and hardscaping (pedestrian pathways) in the approximately six acres of new green space. The GCP Masterplan Working group met in August to review an After-hours permit needed to remediate fireproofing of steel beams in two mechanical shafts in the building and allow Activation Phase activities to commence. DOB granted a use and occupancy permit for the Activation Phase of the project in September. The facility will open to patient care upon receipt of Department of Health Inspections, scheduled for

			mid-November, and DOB Use and Occupancy approval, anticipated early December 2023. The oversize delivery permit process and anticipated delivery schedule were included and reviewed as part of the HCMG monthly reporting. In collaboration with the community, MGUH will schedule oversize deliveries for after-off peak traffic hours apart from future tower crane removal. Due to safety constraints, future oversize tower crane removal must occur during the day. In collaboration with the community, MGUH will schedule oversize tower crane removal to occur Friday through Monday, with the heaviest deliveries on Saturday and Sunday on off-peak traffic days. MGUH received support for the after-hours oversize delivery and removal associated with the Tower Cranes from ANC 2E and ANC 3D. Two of the three Tower Cranes have been removed with the third Tower Crane anticipated to be removed by the end of 2022. The third, and final, tower crane was removed early January of 2023.
10	Vehicular, Pedestrian, and Bicycle Circulation	As part of the Construction Management Agreement discussed in Condition 9 above, MGUH shall work with the University and the GCP to develop a plan acceptable to applicable regulatory agencies in the District of Columbia for vehicular, pedestrian, and bicycle circulation into, around the perimeter of, and within the campus during all phases of construction of the Project. The plan will be submitted to the GCP for review and comment.	The temporary signal at Gate 2 (approved by the GCP Master Planning Working Group and DDOT in 2018) continues to operate with the parking restrictions and associated signage previously approved. Since the new east-west road was opened to traffic in September 2019 and Gate 0 was decommissioned as an alternative campus egress, a plan to decommission the Gate 0 traffic signal and permanently include the pedestrian signalization across Winfield Lane and the Leading Pedestrian Intervals at the Reservoir Road/37th Street/Winfield Lane intersection was submitted to DDOT on February 24, 2020 and was approved on March 24, 2020. The decommissioning of Gate 0 temporary alternative was completed in August 2020. Gate 0 construction was completed October 2023. Gate 1 remains closed to passenger traffic. The permanent traffic signal for Gate 1 (reflecting post-construction conditions, as agreed upon with the GCP during the campus plan process) was submitted to DDOT January 31, 2020. Approval from DDOT was received November 2020. Underground infrastructure for the permanent Gate 1 signal commenced October 2022. Gate 1 construction was completed and opened to pedestrian traffic August 2023, and will open to vehicular traffic when the garage receives DOB Use and Occupancy approval.
			Two temporary construction entrances for the on-site sound attenuated concrete batch plant (between Gate 1 and 37th Street in former parking Lot B) were approved by DDOT on July 9, 2020 and became operational. The temporary construction entrances were reviewed with the GCP prior to obtaining DDOT approval. Both ANC 2E and the Cloisters West HOA provided letters of support for the temporary construction entrances. The temporary construction entrances remain in operation to facilitate construction of the three story below grade parking structure under the landscaped Green in former parking Lot B and will be replaced with new curb and gutter, sidewalks, and street trees with the installation of the public space improvements along Reservoir Road during the remainder of 2022 and into 2023. The temporary construction entrances were removed and permanent sidewalk completed and opened to pedestrian August of 2023.
11	Mini Shuttles	MGUH shall provide additional mini shuttle capacity to transport GUTS passengers from the current stop on the south side of the University's campus to the hospital until the new permanent bus turnaround south of the Lombardi Comprehensive Cancer Care Center is operational.	Operation commenced February 2018, operating hours are from 6:15 AM to 7:00 PM. The transport systems continue to operate at pre-COVID19 Pandemic levels.
12	Reporting and Compliance Review	By November 30th of each year following approval of its Further Processing application for the Surgical Pavilion, MGUH shall file an annual compliance report with the GCP that addresses MGUH's compliance with the above conditions.	The MGUH Annual Compliance Report was submitted to the GCP on November 3, 2023for review and comment. The final report will be submitted November 30, 2023 after review by the GCP and comments, if any, are addressed.
13	Human Rights Act	MGUH will comply fully with the provisions of the DC Human Rights Act of 1977.	Affirmed.

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GEORGETOWN UNIVERSITY

Annual Transportation Monitoring Report

December 2022

Georgetown University

Annual Transportation Monitoring Report

Washington, DC

December 2022

Prepared by:

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INTRODUCTION

On December 1, 2016, the District of Columbia Zoning Commission approved an application for a new Campus Plan for Georgetown University (the University). The order of approval (Zoning Commission Order No. 16-18) was issued on July 21, 2017. The Campus Plan was approved through December 31, 2036, subject to several conditions for the University and MedStar Georgetown University Hospital (the Hospital). Under those conditions, the University and Hospital are required to conduct an *Annual Transportation Monitoring Study*. The methodology for the study is prescribed in the Comprehensive Transportation Report (CTR) that was conducted in conjunction with the 2017 – 2036 Campus Plan, with modifications as indicated in the District Department of Transportation's (DDOT's) report dated November 21, 2016. Excerpts from the CTR and the DDOT report are included in Appendix A. In summary, the *Annual Transportation Monitoring Study* is required to include the following elements:

- University-wide and Hospital-wide transportation surveys, including determination of mode split for each institution;
- A measurement of the University's and Hospital's vehicle trip generation;
- Parking utilization;
- Georgetown University Transportations System (GUTS) ridership counts; and
- A summary of Transportation Demand Management (TDM) activities in effect for each institution and the associated TDM expenditures.

The current student enrollment and university employees on campus is summarized below in Table 1A. The current number of hospital employees is summarized in Table 1B. For comparative purposes, the statistics for 2016 through 2022[1] also are included. The number of employees at the University increased by 3.6 percent and the number of students increased by 1.2 percent compared to 2021 levels. The number of Hospital employees increased by 7.9 percent.

Table 1A
Student Enrollment and University Employee Staffing Levels

Population	2016 CTR	Fall 2017	Fall 2018	Fall 2019	Fall 2021	Fall 2022
Employees	4,150	4,394	4,331	4,410	4,273	4,427
Traditional Undergrad Students	6,675	6,699	6,673	6,672	6,807	6,675
Overall Student Headcount	12,043	12,082	12,131	12,196	12,994	13,150

[1] Due to the operational impacts associated with COVID-19, and with the approval of the Georgetown Community Partnership and DDOT, the Transportation Performance Monitoring study was not conducted in 2020. Therefore, 2020 data are not included in the tables.

Table 1B
MGUH Employee Staffing Levels

Population	2016 CTR	Fall 2017	Fall 2018	Fall 2019	Fall 2021	Fall 2022
Employees	4,434	4,729	4,900	4,456[†]	4,635	5,000

[†] For the Fall 2019 number of employees, MGUH Human Resources determined the report numbers included 454 associates' work locations that were not at MGUH. The number of MGUH employees at MGUH for Fall 2019 was 4,456 employees. Since Fall 2017 and Fall 2018 employment numbers for the Hospital are substantially higher, it is likely that those reported numbers included some employees whose location is not MGUH.

TRANSPORTATION SURVEY

One of the required elements of the *Annual Transportation Monitoring Study* is a mode split survey of the campus community, including both the University and Hospital, that includes students (traditional, non-traditional, and continuing education students) and faculty/staff (including both University and MedStar staff).

University

The transportation survey for the University was conducted from September 20, 2022, through September 30, 2022. The target population for the survey was 34,361 people (including students, faculty, and staff). The survey was distributed on-line. A total of 6,131 responses were received yielding a response rate of 17.8 percent. The mode splits for each University group surveyed are summarized in Table 2.

As shown in Table 2, approximately 76.6 percent of the University's population commutes to campus via non-single occupant vehicle (non-SOV) modes of transportation (i.e. non-auto modes plus carpooling). Another 2.6 percent is dropped-off/picked-up by another vehicle (including private vehicles, taxis and transportation network company (TNC) services, such as Uber and Lyft).

A comparison of 2013 through 2022 University mode split results is summarized in Chart 1. The use of single-occupant private vehicles reported this year decreased by three percent, from 23 percent in 2021 to 20 percent in 2022. Walking, GUTS use, Metrorail, Metrobus, bicycle, ride-hailing, and carpooling mode shares increased in 2022 compared to 2021. Teleworking decreased from 22 percent in 2021 to 14 percent in 2022 (including both the hybrid and teleworking days). The "other" mode shares (e.g., commuter rail, commuter bus, dropped-off by private vehicle, bikeshare, car share, circulator, vanpool, and taxi) increased from three percent in 2021 to six percent in 2022. These changes are largely due to COVID-19 subsiding and restrictions being lifted, which resulted in people returning to campus and to non-auto modes of transportation.

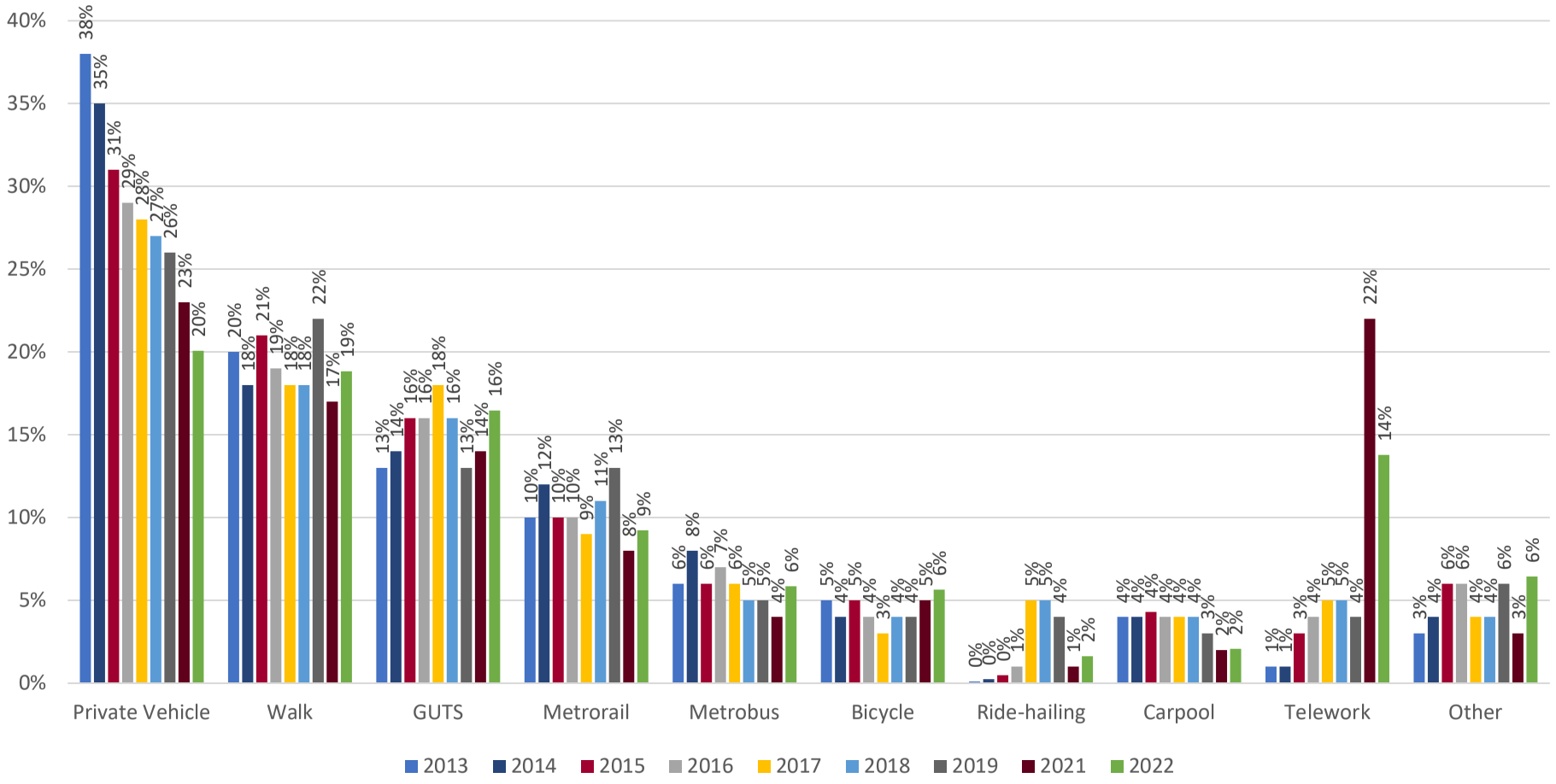
Table 2
University Mode Split[†] (Longest Leg) Summary

Mode \ Group	Off-Campus Undergraduate Students	Graduate or Professional Students	Medical Students	University Faculty	University Staff/Academic Administrative Professional	Affiliate Employees	Other	Overall Population
Private Vehicle	4.4	8.6	13.6	35.0	32.3	38.9	21.2	20.1
Carpool/Vanpool	1.1	1.6	1.1	2.1	2.8	0.0	9.0	2.1
Carsharing	0.2	0.2	0.2	0.4	0.5	0.0	0.0	0.3
Dropped-Off by Private Vehicle	1.1	0.9	1.2	0.9	1.3	0.0	0.0	1.0
Ride-Hailing (TNC, Taxi)	0.3	2.7	1.1	1.7	0.8	0.0	0.0	1.6
Motorcycle/Vespa	0.6	0.0	0.8	1.2	0.3	0.0	0.0	0.4
Subtotal Auto Modes	7.7	14.0	17.9	41.3	38.0	38.9	30.2	25.5
GUTS	6.7	30.1	22.3	4.4	6.3	3.2	21.2	16.5
Remote	1.3	2.3	4.2	25.3	27.7	34.7	6.9	13.8
Metrorail	1.7	11.1	2.0	8.4	10.7	9.5	3.7	9.2
Metrobus	2.5	9.2	1.5	2.7	5.0	1.1	2.1	5.9
Commuter Rail/Bus	1.9	2.3	0.4	0.9	2.4	3.2	2.1	2.0
Circulator	1.0	1.1	0.2	0.3	0.3	0.0	4.8	0.7
Scooter	4.6	2.8	5.9	0.4	0.5	0.0	0.0	2.0
Bicycle/Bikeshare	5.3	7.2	6.0	6.4	3.3	5.3	8.5	5.6
Walk	67.3	19.9	39.6	9.9	5.8	4.2	20.6	18.8
Subtotal Non-Auto Modes	92.3	86.0	82.1	58.7	62.0	61.1	69.8	74.5

* *The remote work information is obtained as a sum of total working days of fully remote employees (Remote work/designated mode of work question was only asked to "University Staff/Academic Administrative Professional (AAP)" group). This count does not include remote work days of hybrid work mode employees.*

More detailed information from the University's 2022 Transportation Survey is included in Appendix B.

Chart 1
Historical University Mode Split Comparison



* The other category includes the following responses: commuter rail, commuter bus, dropped off by private vehicle, bikeshare, car share, circulator, vanpool, and taxi.

Hospital

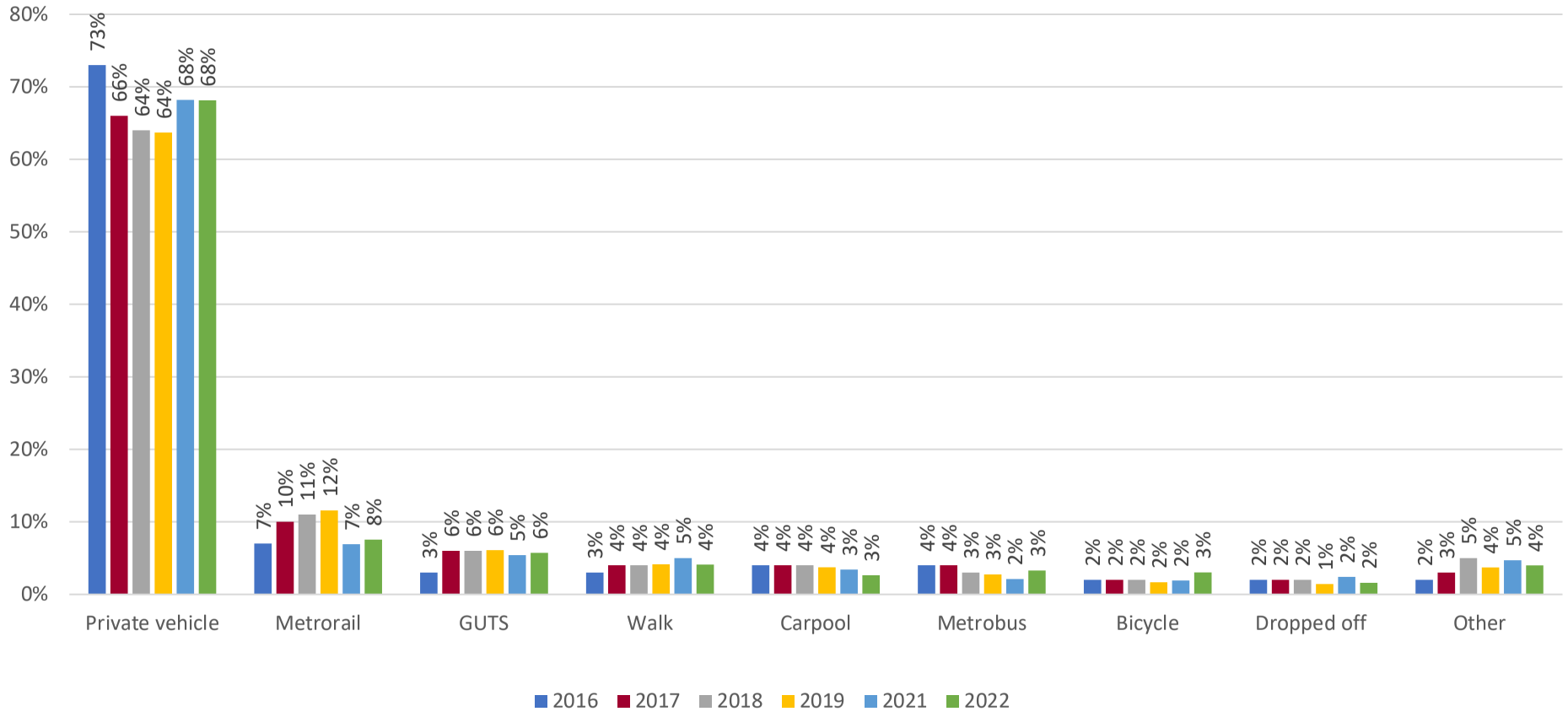
The transportation survey for the Hospital was conducted from September 20, 2022, through September 30, 2022. The target population for the Hospital's survey was 5,000 people (including contractors, medical staff, nurses, and other associates). A total of 1,238 responses were received yielding a response rate of 24.7 percent. The mode splits for each Hospital group surveyed are summarized in Table 3.

Table 3
Hospital Mode Split (Longest Leg) Summary

Mode \ Group	Physician/ Nurse Practitioner	Nurse	Contractors	Other Associate	Overall Population
Private Vehicle	80.3	69.3	66.7	62.4	68.1
Carpool/Vanpool	1.4	3.2	0	2.9	2.6
Carsharing	0.1	0.8	0	1.4	1.0
Dropped-Off by Private Vehicle	1.3	1.3	0	1.8	1.6
Ride-Hailing (TNC, Taxi)	0.6	1.9	0	1.2	1.2
Motorcycle/Moped	NA	NA	NA	NA	0.1
Subtotal Auto Modes	**83.7**	**76.5**	**66.7**	**69.7**	**74.6**
GUTS	4.1	7.3	0	5.7	5.7
Metrorail	0.6	3.4	33.3	12.5	7.6
Metrobus	1.1	2.3	0	4.7	3.3
Commuter Rail/Bus	0.2	0.6	0	1.8	1.1
Circulator	0	0	0	0	0
Bicycle/Bikeshare	5.8	2.6	0	2.0	3.0
Walk	4.0	6.7	0	2.9	4.1
Scooter-share	0.4	0.6	0	0.7	0.6
Subtotal Non-Auto Modes	**16.2**	**23.5**	**33.3**	**30.3**	**25.4**

Hospital mode split results for 2016 through 2022 are summarized and compared in Chart 2. Compared to last year, the use of single-occupant vehicles decreased by 0.2 percent. Metrorail, Metrobus, Circulator, and commuter bus/rail saw a combined increase of 1.6 percent. GUTS mode share increased by 0.3 percent. Walk and scooter-share mode splits decreased by a combined one percent.

Chart 2
Hospital Mode Split Comparison



* The other category includes the following responses: Commuter Rail, Commuter Bus, Scooter-share, Taxi, Vanpool, Motorcycle, Carshare, and Bikeshare.

The Hospital continues to operate with a reduced on-campus parking supply as the result of the on-going construction of the new medical/surgical pavilion. Currently, 64 associates who previously drove alone to campus receive transit subsidies (in the amount of $255 per month) in exchange for relinquishing their on-campus parking permit. Additionally, the Hospital continues to provide off-site parking in Rosslyn, Dupont Circle, and Wisconsin Avenue near the GUTS stops and subsidizes the cost of off-campus parking for employees. To support the off-campus parkers, the Hospital continues to supplement the GUTS routes with a total of eight buses.

More detailed information from the Hospital's 2022 Transportation Survey is included in Appendix B.

VEHICLE TRIP GENERATION

Overview

Both the University and Hospital Transportation Demand Management Plans approved as part of the 2017 – 2036 Campus Plan set forth two key performance targets. The first is a commitment to achieve significant reductions in projected peak hour trip generation for each institution. The second target is an aspirational goal of an even more significant reduction in projected peak hour trips that the University and Hospital will strive to achieve over the term of the Campus Plan. The commitment and aspirational goals for each institution and the baseline counts used to establish them are summarized in Table 4.

Table 4
Summary of Campus Plan[2] Performance Targets

Performance Target	University		Hospital	
	AM Peak Hour	PM Peak Hour	AM Peak Hour	PM Peak Hour
Baseline[†]	576	516	1,310	988
Commitment	632	591	1,245	939
Aspirational Goal	593	532	1,153	870

[†] The baseline trip generation for each institution was established in the Campus Plan CTR based on 2015 and 2016 traffic counts.

As required by the Zoning Commission Order, the number of observed peak vehicle trips generated by the University and Hospital during the AM and PM peak hours were measured. Vehicular traffic counts were conducted from 6:00 AM to 10:00 AM and from 4:00 PM to 8:00

[1] The transportation performance standards established for the Hospital in the Campus Plan were superseded by more stringent performance standards set forth in the further processing application for the new Medical/Surgical Pavilion approved by the Zoning Commission on June 8, 2017 (Zoning Commission Case #16-18A). This report reflects the revised performance standards.

PM on Tuesday, September 20, 2022, through Thursday, September 22, 2022. Traffic count data is included in Appendix C.

To differentiate University trips from Hospital trips, counts were conducted at the campus driveways and at the internal campus parking facilities that were open and operational at the time. The count locations are shown on Figure 1.

Vehicles entering and exiting each on-campus parking facility were assigned to either the University or the Hospital, depending on which institution uses the parking facility. A summary of each institution's parking allotment is shown in Table 5.

Table 5
University and Hospital On-Campus Parking Allotment

Name	Capacity (# of spaces)					
	University			Hospital		
	Marked	Unmark	Total	Marked	Unmark	Total
Garage 1				485	0	**485**
Garage 2[1]				529	45	**574**
Garage 4	188	0	**188**			
Southwest Garage	367	0	**367**	269	0	**269**[2]
Leavey Garage[2]	374	0	**374**	539	43	**582**
Lot E (Medical/Dental)	62	0	**62**			
Lot G (New Research)	6	0	**6**			
Lot Y (Yates)	13	0	**13**			
Lot 6 (Poulton)	15	0	**15**			
Lot 9 (Lauinger Library)	80	0	**80**			
Lot WM (Wisemiller's)	9	3	**12**			
Sub-total	**1,114**	**3**	**1,117**	**1,822**	**88**	**1,910**
Grand Total	**3,027**					

[1] Portions of Garage 2 were closed for repair during the counts resulting in a lower capacity than previous years.

[2] Historically, the hospital has leased 199 spaces in Southwest Garage. During the pandemic, the hospital leased an additional 70 spaces for a total of 269. The lease for the additional 70 spaces expired on September 30, 2022, but the additional spaces were held by the hospital at the time the traffic counts were conducted.

Leavey and Southwest Garages

Two parking facilities are shared by both the University and Hospital: Leavey Garage and Southwest Garage. For Leavey Garage, the University assigned spaces previously were accessed via a driveway on the west side of the garage. The Hospital spaces previously were accessed via the driveway on the north side of the garage. In conjunction with the construction of the new medical/surgical pavilion, the northern driveway of Leavey garage was closed in 2019, and the eastern driveway, which had previously been closed to traffic, was reopened. Internal barricades within Leavey were removed to allow Hospital and University traffic to use either the western or eastern entrance. For this study, to determine the proportion of Hospital versus University traffic

entering and exiting Leavey garage, motorists were surveyed to confirm their affiliation with either the Hospital or University at both driveways upon entering and exiting the garage.

Moving forward, access to Leavey will continue to be shared between the University and Hospital. Accordingly, we recommend continuing the surveys to determine the proportionality of the Leavey trips unless and until such time as an automated system is installed that can identify MedStar vehicles separately from University vehicles.

For the Southwest Garage, parking spaces are not assigned in the garage, nor is access for the University and Hospital separated. Therefore, the trips entering and exiting Southwest Garage must be proportionally divided between the two institutions. Pursuant to the performance monitoring plan outlined in the October 2016 CTR, which was approved by the Zoning Commission as part of the University's 2017-2036 Campus Plan, trips were assigned proportionally based on the number of spaces assigned to each institution at the time. Note that this approach assumes that the number of University parking passes issued for Southwest Garage remains unchanged from year-to-year and that University policies regarding parking do not influence parking behavior at the Southwest Garage. Any increase in the number of University issued parking passes or policies that encourage parking in the Southwest Garage would adversely affect the allocation of trips to the hospital since it is assigned a fixed proportion of the trips based on the number of hospital-issued passes divided by the total number of parking spaces (not the total number of passes issued).

Peak Hour Determination

The peak hours for each institution were determined separately, after averaging the counts at their respective on-campus parking facilities over the three days. The University's peak hours occurred from 9:00 AM to 10:00 AM and from 5:15 PM to 6:15 PM. The Hospital's peak hours occurred from 6:30 AM to 7:30 AM and from 4:30 PM to 5:30 PM.

The University accounted for 38.9 percent of the trips from 9:00 AM to 10:00 AM and 41.5 percent of the trips from 5:15 PM to 6:15 PM. The Hospital accounted for 70.3 percent of the trips from 6:30 AM to 7:30 AM and 63.2 percent of the trips from 4:30 PM to 5:30 PM. Note that not all trips to/from campus park in a parking facility. Examples of trips that enter/exit campus but may not enter a campus parking facility include: construction vehicles, service vehicles, GUTS buses, taxis, TNC vehicles, and other vehicles dropping-off passengers. Therefore, the total trip generation for each institution was determined by applying the percentages above to the total inbound and outbound campus trips (determined by averaging the campus driveway counts over the three days) for the appropriate hours.

University Trip Generation

The resulting trip generation for the University is shown in Table 6. For comparative purposes, the 2017 counts, 2018 counts, Spring 2019 counts, 2019 Fall counts, 2021 Fall counts and the

performance targets also are provided in Table 6. Detailed trip generation data are included in Appendix C.

As shown in Table 6, the University currently is generating 16.0 percent more AM peak hour vehicle trips and 8.4 percent more PM peak hour vehicle trips than in 2021. Both the AM and PM peak hour trip counts fall below both the Commitment and Aspirational Goal set forth in the 2017-2036 Campus Plan.

Table 6
University Observed Trip Generation Summary

Performance Target	AM Peak Hour Trip Generation	PM Peak Hour Trip Generation
Baseline[†]	576	516
Commitment	632	591
Aspirational Goal	593	532
Fall 2017 Trip Counts	473	463
Fall 2018 Trip Counts	577	585
Spring 2019 Trip Counts	533	536
Fall 2019 Trip Counts	566	502
Fall 2021 Trip Counts	438	429
Fall 2022 Trip Counts	508	465

[†] The baseline trip generation for each institution was established in the Campus Plan CTR based on 2015 and 2016 traffic counts. The baseline did not include any adjustments for on-street parking. Therefore, the trip counts for 2017 through 2022 presented in this table do not include adjustments for on-street parking. See further details below in *On-Street Parking*.

On-Street Parking

Members of the community engaged in the Georgetown Community Partnership (GCP), and specifically the Transportation and Parking Working Group, have identified on-street parking as an area of concern that should be, to the extent possible, assessed and monitored. The Campus Plan CTR did not include any requirement for monitoring on-street parking or including on-street parking counts in the established Performance Target Commitment and Aspirational Goal for the University and Hospital. Therefore, from a compliance perspective, the annual trip counts do not reflect any adjustment for on-street parkers. However, in light of the community's interest in this issue, annual on-street parking estimates derived from the annual Transportation Surveys for both institutions (or other methods that may be identified through consultation with the GCP and/or DDOT) have been recorded and will continue to be tracked and reported.

The percent of on-street parkers was calculated from the survey data as the number of on-street parkers who arrived or departed during the AM peak hour divided by the total number respondents who arrived or departed by a vehicular mode during the AM peak hour. The same analysis was conducted for the PM peak hour. Those percentages were then applied to the AM

and PM peak hour trip generation determined from the on-campus trip counts. The resulting estimated University on-street parkers is summarized in Table 7.

As shown in Table 7, the estimated number of University trips parking on neighborhood streets increased slightly during the AM peak hour and remained relatively unchanged during the PM peak hour.

Table 7
Summary of Estimated University On-Street Parkers

Year	AM Peak Hour		PM Peak Hour	
	Percent†	**Number**	**Percent†**	**Number**
Fall 2017	12.0%	57	11.3%	52
Fall 2018	7.2%	42	7.4%	43
Spring 2019	7.2%	38	7.4%	40
Fall 2019	11.5%	65	11.2%	56
Fall 2021	13.6%	69	11.3%	55
Fall 2022	12.2%	71	10.6%	55

† The percentage of parkers that arrived to or departed from campus during the peak hour and parked on-street.

Hospital Trip Generation

The resulting trip generation for the Hospital is shown in Table 8. For comparative purposes, the 2017 counts, 2018 counts, Spring 2019 counts, Fall 2019 counts, Fall 2021 counts, and the performance targets also are provided. Detailed trip generation data are included in Appendix C.

Table 8
Hospital Observed Trip Generation Summary

Performance Target	AM Peak Hour Trip Generation	PM Peak Hour Trip Generation
Baseline†	1,310	988
Commitment	1,245	939
Aspirational Goal	1,153	870
Fall 2017 Trip Counts	1,073	902
Fall 2018 Trip Counts	1,025	844
Spring 2019 Trip Counts	1,030	842
Fall 2019 Trip Counts	933	724
Fall 2021 Trip Counts	938	770
Fall 2022 Trip Counts	945	791

† The baseline trip generation for each institution was established in the Campus Plan CTR based on 2015 and 2016 traffic counts. The baseline did not include any adjustments for on-street parking. Therefore, the trip counts for 2017 through 2022 presented in this table do not include adjustments for on-street parking. See further details below in *On-Street Parking*.

Table 8 shows that the Hospital currently is generating 0.7 percent more AM peak hour vehicle trips and 2.7 percent more PM peak hour vehicle trips than in 2021. The Hospital's trip generation continues to be well below both the Performance Target Commitment and Aspirational Goal established in the 2017 – 2036 Campus Plan.

On-Street Parking

As shown on Table 9, the estimated number of Hospital trips that parked on neighborhood streets increased during the AM peak hour and decreased during the PM peak hour.

Table 9
Summary of Estimated Hospital On-Street Parkers

Year	AM Peak Hour		PM Peak Hour	
	Percent†	**Number**	**Percent†**	**Number**
Fall 2017	1.0%	11	1.1%	10
Fall 2018	3.9%	40	4.4%	37
Spring 2019	3.9%	40	4.4%	37
Fall 2019	4.7%	44	4.2%	30
Fall 2021	4.6%	45	8.1%	68
Fall 2022	6.4%	65	7.1 %	60

† The percentage of parkers that arrived to campus during the peak hour and parked on-street.

PARKING UTILIZATION

The Campus Plan requires that the University maintain a parking inventory of no more than 4,080 parking spaces within the Campus Plan boundary. As shown in Table 5, six lots and five garages currently are in operation on campus (Lots A, B, and B1 are no longer in operation due to the construction of the new medical/surgical pavilion). Of the 3,027 spaces currently available on campus, 1,117 parking spaces were designated for University use and 1,910 parking spaces were designated for Hospital use at the time counts were conducted. Marked spaces accounted for 2,936 (or 97 percent) of the total while the remaining 91 spaces (three percent) are unmarked/stacked spaces that fluctuate in location due to displaced parking caused by construction activities and valet parking available at some garages. The total amount of parking capacity on campus has temporarily declined from the cap of 4,080 spaces to 3,027 spaces at the time of the 2022 data collection. The decrease in parking capacity can be attributed to the significant amount of construction taking place throughout the campus.

Parking occupancy counts were conducted for the University's and the Hospital's parking facilities on Wednesday, September 21, 2022. The number of occupied marked and unmarked parking spaces was recorded hourly from 6:00 AM to 7:00 PM in each of the on-campus parking facilities that serve University and Hospital operations. Table 10 summarizes the peak occupancy for each campus parking facilities for Fall 2022 compared to Fall 2021.

As shown in Table 10, the overall peak parking demand occurred at 12:00 PM when 86 percent of the parking spaces were occupied. Overall, the number of vehicles parked on-campus during the peak increased by approximately nine percent compared to last year.

Parking demand by time of day for each of the campus facilities and for all facilities combined are included in Appendix D.

Table 10
On-Campus Parking Utilization

Parking Facility	2021/2022 Capacity	2021 Peak Occupancy		2022 Peak Occupancy	
		Time	Spaces	Time	Spaces
University Parking Facilities					
Garage 4	181/188	2 PM	108 (60%)	3 PM	92 (49%)
Lot E (Medical/Dental)	62/62	2 PM	35 (57%)	3 PM	26 (42%)
Lot G (New Research)	5/6	9, 10, 11 AM	3 (60%)	12 PM	3 (50%)
Lot Y (Yates)	13/13	10, 11 AM	8 (62%)	12, 1, 2 PM	8 (62%)
Lot 6 (Poulton)	21/15	1, 2, 3 PM	12 (57%)	11 AM, 12 PM	11 (73%)
Lot 9 (Lauinger Library)	81/80	3 PM	55 (68%)	1 PM	56 (70%)
Lot WM (Wisemiller's)	9/12	3 PM	6 (67%)	7 PM	7 (58%)
Hospital Parking Facilities					
Garage 1	470/485	11 AM	368 (78%)	12 PM	438 (90%)
Garage 2	652/574	1 PM	487 (75%)	2 PM	546 (98%)
Shared Parking Facilities					
Southwest Garage*	639/636	12 PM	577 (90%)	11 AM	587 (92%)
Leavey†	1,039/956	1 PM	821 (79%)	11 AM, 12 PM	90 (95%)
Total	**3,172/3,027**	**12 PM**	**2,433 (77%)**	**12 PM**	**2,640 (86%)**

* It is not possible to distinguish MedStar Parking and University vehicles in Southwest Garage. At the time counts were conducted, MedStar accounted for 269 of the 636 spaces in SW Garage.

† Due to construction activities, the internal barricades in Leavey garage were removed. Therefore, MedStar and University parking occupancy was not separated.

GUTS RIDERSHIP

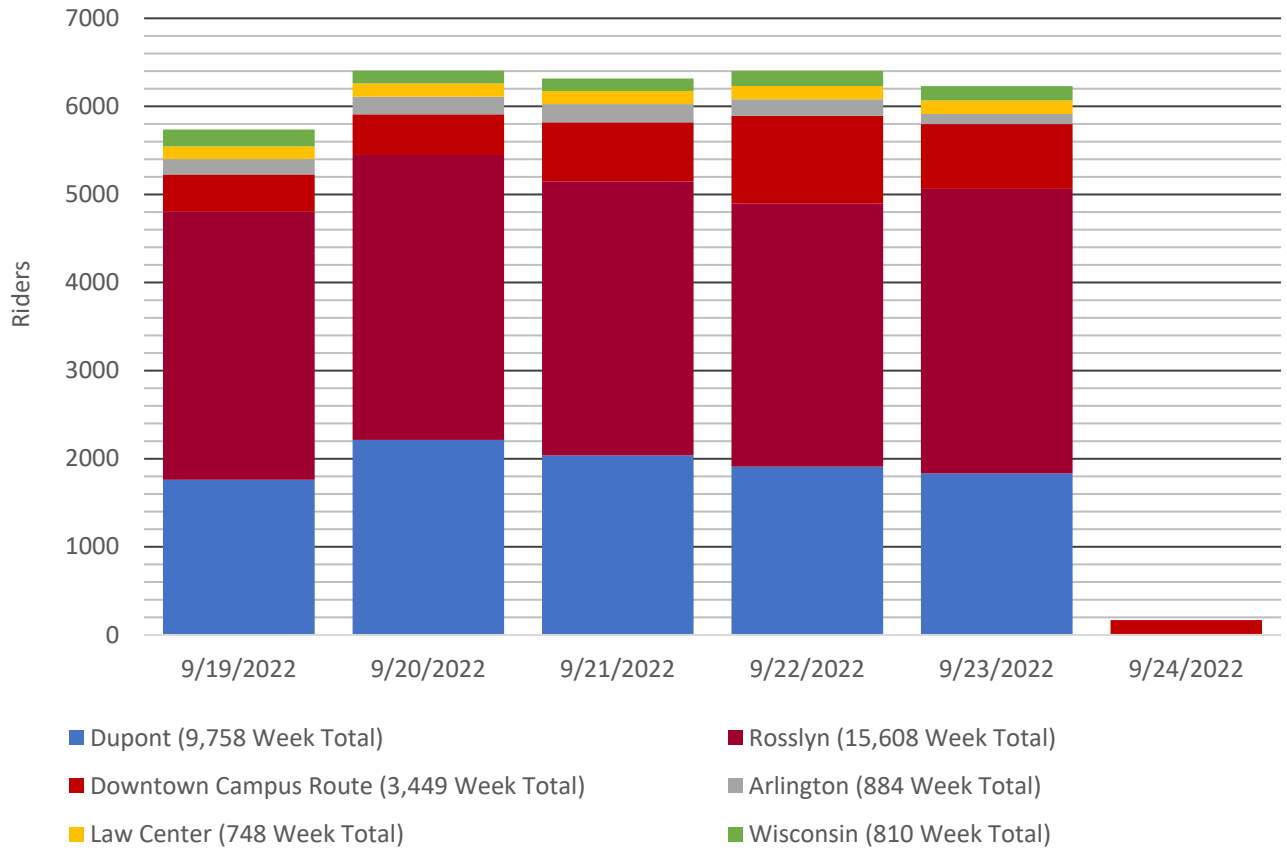
As a condition of approval of the 2017 – 2036 Campus Plan, the University was required to install Automatic Passenger Counters (APCs) and Automatic Vehicle Locators (AVLs) on its fleet of GUTS buses. The APCs were installed during the Fall 2017 semester and the AVLs were installed during the Spring 2017 semester. However, third party buses, which are used to supplement the University's fleet, do not have APCs. On those buses, drivers take manual tallies of the number of riders. Therefore, the ridership data is a combination of APC data and manually recorded counts taken by the drivers.

Automatic Passenger Counters

The impetus behind DDOT's request for the University to install the APCs was to establish a more accurate method of determining GUTS ridership. Prior to the installation of the APCs, all bus drivers recorded the number of passengers boarding and alighting each bus. Prior to the installation of APCs in Spring 2017, that data showed a decline in ridership from year-to-year; however, the annual transportation surveys showed an increase in ridership.

The ridership on each of the GUTS routes by day, for the week of September 19, 2022 (Monday through Saturday) is shown on Chart 3 below.[3] Hourly ridership data for each route are provided in Appendix E.

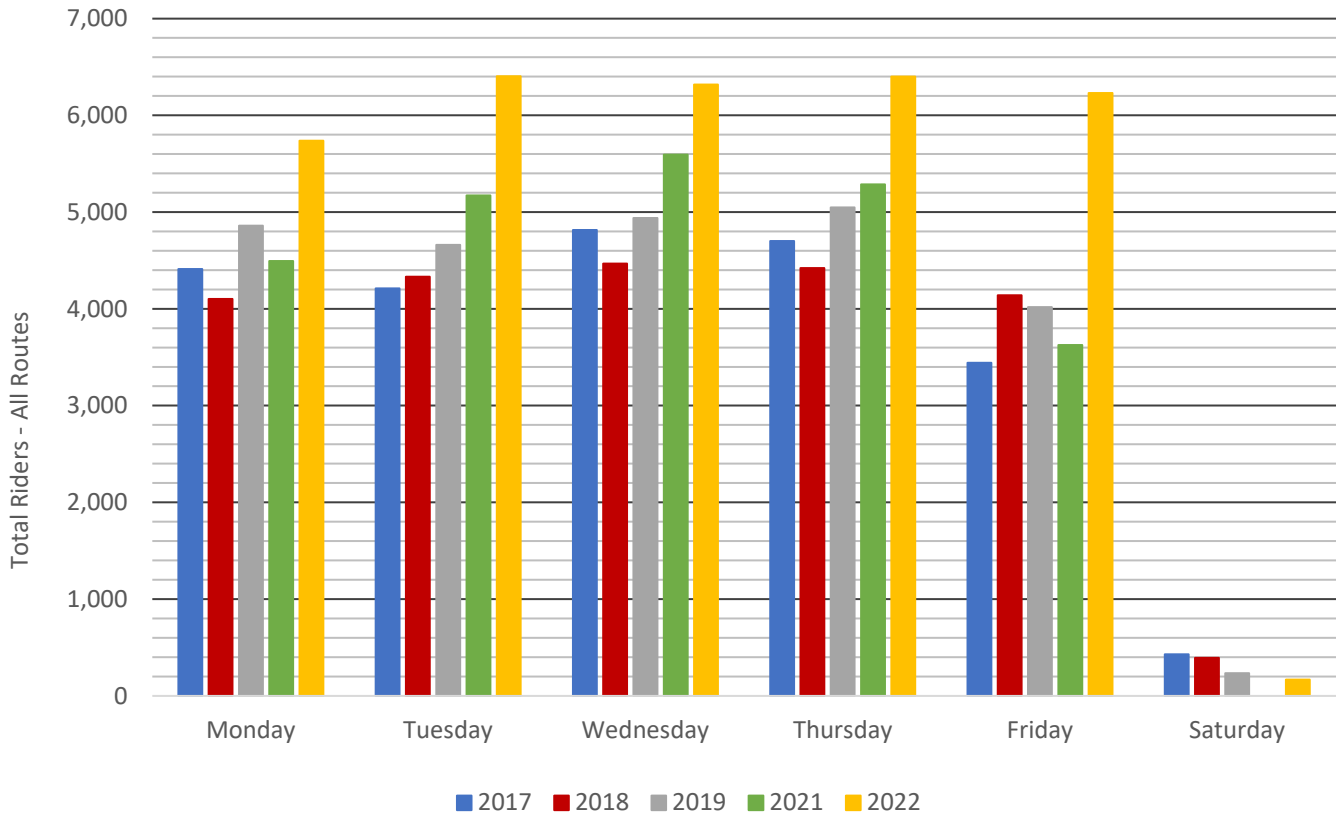
Chart 3
GUTS Ridership by Day (includes University-owned and contract buses)



[3] APCs are not installed on contract buses that are used to supplement the University's fleet of buses. Therefore, ridership data for those buses is provided by the bus drivers. The number of contract buses used on a daily basis may vary depending on whether a University driver calls off and a contract bus is needed to replace them.

Chart 4 shows a yearly comparison of GUTS ridership. This year, the data obtained from the University showed an increase in ridership each weekday. The increase in ridership can partially be attributed to several factors including a new route for the University, the Downtown Campus Shuttle, to provide access between main campus and off-campus student housing at 55 H Street and the School of Continuing Studies at 640 Massachusetts Avenue; new classes starting at the Downtown campus; more University students living off the Wisconsin Avenue route; more graduate school programs; and additional "on-demand" routes in the evening. The increase in GUTS ridership also is reflected in the MedStar and University surveys. The MedStar survey showed an increase in GUTS ridership of one percent for those that use GUTS for their longest mode of transportation and an increase of two percent for those that use GUTS as their last mode of transportation. Individuals who indicated that they use GUTS on a regular basis increased by 6.3 percent compared to last year. The University survey showed an increase two percent for those that use GUTS as their longest mode of transportation for the Main Campus and increase of 8.9 percent for those that use GUTS as their transportation mode for the last portion of their trip to Main Campus.

Chart 4
Historical Daily GUTS Ridership



Automatic Vehicle Locators

Since installation of the AVLs, GUTS riders can see the real-time locations of the GUTS buses and receive real-time arrival times using the NextGUTS feature on the Georgetown University app.

TDM ACTIVITIES

The 2017 – 2036 Campus Plan requires both the University and Hospital to report on each institution's TDM expenditures for the year. DDOT also requested that each institution indicate the anticipated expenditures for upcoming years. Specific efforts for each institution are described more fully below.

University

The University's investment in their TDM Plan is evidenced by a continued reduction in AM and PM peak hour vehicle trips. While the University trip counts are substantially below the performance target commitments and aspirational goals established in the Campus Plan, the University recognizes that these trip thresholds were based on enrollment projections that are anticipated to occur over time. The University will continue its TDM efforts to mitigate impacts associated with future growth. The University's expenditures are included in Table 11. The University spent $3,455,071 in 2021 TDM expenditures and anticipates $5,467,400 in 2022 and $4,897,600 in 2023 TDM expenditures.

Table 11
University's Past, Current, and Anticipated Future TDM Expenditures

TDM Strategy	Actual Costs					Anticipated Costs
	FY2017	FY2018	FY2019	FY2021	FY2022	FY2023
Georgetown University Transportation System						
Continued operation of GUTS system, which connects campus to the Rosslyn and Dupont Circle Metro Stations and other key destinations Continued operation of modified Saturday GUTS service to connect students to shopping Continued operation of Late Night Shuttle Routes Continued operation of mini-shuttle	$3.57M	$3.91M	$4.41M	$3.16M	$4.104M	$4.5M
Installation of Automatic Passenger Counters in GUTS buses	$65,500	N/A	N/A	N/A	N/A	N/A
Automatic Passenger Counter Maintenance – GUTS	$51,000	N/A	N/A	$8,150	$25,000	$10,000
Annual maintenance and updates for GUTS GPS devices	N/A	$56,814	$50,465	$56,150	$49,920	$50,000
Evaluation of additional GUTS service/new routes to attract new riders	$2,700	N/A	N/A	N/A	N/A	N/A
Safe Rides[‡]						
Continued operation of Safe Rides	$74,500	$74,000	$77,000	$0	$87,593	$90,000
Transit Incentives						
Administration of SmartBenefits to provide pre-tax savings on public transportation costs (currently 84 employees enrolled)	N/R	N/R	$22,441	$21,438	$24,754	$25,000
Launch and administration of vanpool services, including carpool matching and pre-tax savings	N/A	N/A	N/A	N/A	N/A	$3,000
Bicycle Infrastructure, Amenities, and Services						
New bicycle racks	$20,000	$0	$0	$0	$0	$0
Two new bike maintenance stations	$3,000	$0	$0	$0	$0	$0
Abandoned bike removal – a partnership between GUPD and Office of Sustainability	$1,000	$1,000	$1,000	$0	$0	$0
Free bicycle safety courses and free helmets to students	$3,725	$1,000	$0	$0	$0	$0
Free bike registration through GUPD and availability of discounted bike locks	N/R	N/R	$100	$0	$0	$0
Free access to Yates' showers and locker room and discounted locker rentals for bike commuters	N/R	N/R	$5000	$0 – closed for COVID-19	$0	$0

TDM Strategy (continued)	Actual Costs					Anticipated Costs
	FY2017	FY2018	FY2019	FY2021	FY2022	FY2023
Bicycle Infrastructure, Amenities, and Services (continued)						
Provided Capital Bikeshare Discounts for faculty/staff through the GU Wellness Program (50% discount on memberships)	$5,000	$5,000	$5,000	$0	$0	$0
Promotion of new Capital Bikeshare Discount for students and existing discount for employees (Website updates, giveaways, and printing promotional materials)	N/A	N/A	$0	$0	$0	$0
Improvements to bike repair stations	N/A	N/A	N/A	$0	$0	$0
Award of Bicycle Friendly University Bronze status	N/A	N/A	N/A	$100	$0	$0
Host one adult bicycle education course	N/A	N/A	N/A	N/A	N/A	$5,000
Launch of Walking and Biking Association business membership at the Local Leader Level, including webinars and education courses to promote biking and walking	N/A	N/A	N/A	N/A	N/A	$2,500
Parking Management						
Installation of infrastructure for four Electric Vehicle Charging Stations	$15,400	$9,200	N/A	N/A	N/A	N/A
Maintenance of four electric vehicle charging stations	N/A	N/A	N/A	N/A	$6,508	$0
Launch of new parking management equipment in Leavey Garage and continued maintenance of automated systems in Southwest Garage and Leavey Garage to provide parking pricing flexibility	$350,000	$22,000	$54,658	$43,671	$70,105	$60,000
Discounted parking for carpools	N/R	N/R	$25,750	$0 – no carpool passes administered during pandemic	$25,872	$26,000
Partial-week parking for faculty/staff on campus two or three days per week	N/A	N/A	N/A	$0	$0	$0

TDM Strategy (continued)	Actual Costs					Anticipated Costs
	FY2017	FY2018	FY2019	FY2021†	FY2022	FY2023
Education and Outreach						
On-going transportation website promotion and maintenance	$2,500	$2,500	$2,500	$0	$0	$0
Development and printing of transportation guide (overview of transportation amenities and benefits available to new hires, employees, and students)	N/A	N/A	N/A	$0	$0	$6,000
Promoting transportation options at major campus events such as the Wellness Fair and New Student Orientation (promotional materials and giveaways)	N/A	N/A	$0	$0	$0	$0
Promoting and participating in regional transportation events such as Bike to Work Day, Car Free Day, (Park)ing Day	N/R	N/R	N/R	$0	$0	$0
Carpool Matching Tool Development and Promotion	$0	$5,000	$0	$0	$0	$0
Manage Promoting ZipCar Discount	N/R	N/R	$100	$100	$100	$100
TDM Coordinator	N/A	N/A	$53,746	$116,450	$94,540	$120,000
Total Expenditures						
	$4,164,325	**$4,086,514**	**$4,707,760**	**$3,455,071**	**$5,467,400**	**$4,897,600**

N/A: Not Applicable, N/R: Not Reported in Prior Years

† FY21 expenditures are for July 1, 2020-June 30, 2021. During this time, University operations were greatly reduced, with employees encouraged to telework when possible, all classes occurring online, and few students living on campus.

‡ The University's SafeRides program provides a safe alternative to walking alone at night by providing rides to and from campus and adjacent neighborhoods. SafeRides is a service provided for students, faculty, and staff and is especially important for students who are not permitted to have cars on campus.

Hospital

The Hospital's investment in their TDM Plan is evidenced by a substantial reduction in AM and PM peak hour vehicles trips over the last several years. While the Hospital is substantially below both its Performance Target Commitments and Aspirational Goals, the Hospital recognizes that these trip thresholds were established based on employment projections that are anticipated to occur over time. The Hospital will continue its TDM efforts to offset increases in trips as a result of continued growth. A list of the Hospital's TDM activities and expenditures for 2022 are provided in Table 12 along with the Hospital's anticipated 2023 TDM expenditures.

The number of associates enrolled in SmartBenefits remained the same as last year. The number of associates currently taking advantage of the transit subsidy decreased from last year.

Table 12
Hospital's Past, Current, and Anticipated Future TDM Expenditures

TDM Strategy	Actual Cost					Anticipated Cost
	2017	2018	2019	2021	2022	2023
Education and Outreach						
Hired Transportation Coordinator - Provides all new hires with information on commute alternatives and provides assistance in planning environmentally friendly commutes - Promotes the Guaranteed Ride Home (GRH) program to associates and distributes promotional GRH materials - Distributes public transportation schedules and bicycling route maps	$66,538	$128,500	$130,247	$138,375	$141,834	$145,380
Prepared Transportation Access Guide	$10,250	$0	$0	$0	$0	$0
Provided eight shuttle buses - Connects the hospital to the Rosslyn and Dupont Circle Metro Stations and other key destinations - Supplements GUTS system when University is not open - Provides additional capacity during Hospital's peak demand	$1,300,000	$1,365,451	$1,299,389	$1,336,684	$1,941,154	$1,853,580
Provided mini-shuttle service - Financially supports the university's mini-shuttle service, which transports associates with limited mobility from the McDonough Bus Plaza to the hospital - 2017 costs include MedStar's portion of the operational costs - 2018 – 2021 costs include operational costs plus cost of two additional shuttles	$80,031	$147,722	$332,308	$353,025	$337,040	$337,040

Table 12 (continued)
Hospital's Past, Current, and Anticipated Future TDM Expenditures

TDM Strategy	Actual Cost					Anticipated Cost
	2017	2018	2019	2021	2022	2023
Transit Incentives						
Provided SmartBenefits - Provides pre-tax savings on public transportation cost for enrolled associates (currently 33 associates are enrolled)	$4,832	$4,832	$4,832	$1,504	$35,504†	$35,504†
Provided Transit Subsidies in amount of $255/month to associates to use for public transportation to reduce on-site parking during construction† - Only offered to Associates who previously drove alone - Subsidies began in October 2017 - There are currently 64 associates enrolled	$104,040	$104,040	$345,780	$256,980	$257,040	$195,840
Parking Management						
Initiated a new parking policy during construction that limits on-campus parking to associates based on their work schedule and years of service. Secured off-site parking to accommodate those no longer able to park on campus. ‡	$320,000	$1,193,100	$1,396,686	$1,001,842	$1,407,090	$1,656,948
Total Expenditures						
	$1,885,691	**$2,943,645**	**$3,509,242**	**$3,088,410**	**$4,119,662**	**$4,224,292**

† Prior years inadvertently reported the cost of transit subsidies per month rather than the annual cost. The expenditure has been updated to an annual cost beginning in year 2022.

‡ The cost of off-campus parking has increased over the years due to annual lease parking space rate increases and increases in the total number of off-campus spaces. The anticipated cost for 2023 reflects such increases.

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