

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



990 Form

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

	Α	For the	2004 calendar year, or tax year beginning 7/01/04, and ending 6/30/05		
2010) 1 B	7	applicable Use IRS ss change label or	•	ployer identification no
T-0	()	7	- label of	E Tele	ephone number
$\tilde{\alpha}$		Initial	[A.m.]	41	9-434-4524
	IU [Finali			ounting method Cash
APR		Amen	ded return Specific City or town, state or country, and ZIP + 4	X Accr	rual Other (specify)
		Applica	ation pending tions. FINDLAY OH 45840		
EARED: 36804869	<		Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable and I are not applicable to sect	tion 527	
CLEARED	10		trusts must attach a completed Schedule A (Form 990 or 990-EZ) H(a) Is this a group return for a	affiliates	? Yes X No
7. % 28. 7.	SS_⊆		e ► WWW.FINDLAY.EDU H(b) If "Yes," enter number of		
可是			zation type H(c) Are all affiliates included?		∐ Yes ∐ No
20 2			only one) ► X 501(c) (3) < (insert no) 4947(a)(1) or 527 (If "No," att a list See ins	•	
STATUTE	K		nere If the organization's gross receipts are normally not more than \$25,000 H(d) Is this a separate return for	-	
STATUTE)		ganization need not file a return with the IRS, but if the organization received a organization covered by a		uling? Yes No
₹ ₹			90 Package in the mail, it should file a return without financial data. Some states I Group Exemption Num M Check I if the c		ation is not required
S	. –			•	•
	<u>L</u>	Part I			
	<u>- ::E</u>	Ť	Contabilities with south and applicamental second STATUTE UNIT	7 5	iruciioris.)
		1	RECEIVED 2 405 COOL		
		a b	Direct public support Indirect public support 15 93,405,692 16 93,951		
		6	Government contributions (grants) APR 7 16 2010 6,592,257	ا دري ويو	
		d	Total (add lines 1a through 1c) (cash \$ 9,059,636 noncash \$ 1,032,264)	1 d	10,091,900
		2	Program service revenue including government fees and contracts (from Party line 93)	2	72,243,841
		3	Membership dues and assessments ECEIVED AGRENCE	3	
		4		4	172,926
	\cong	5	Dividends and interest from securities R 1 6 2010	5	276,073
	2010	6a	Interest on savings and temporary cash investments Dividends and interest from securities 1 6 2010 Gross rents Less rental expenses SEE STATEMENT 1 6b 253,756	1	
	คร	ь	Less rental expenses SEE STATEMENT 1 6b 253,756	11.5 1 to 1	
	=	С	Net rental income or (loss) (subtract interest from line 6a)	6c	37,841
		7	Other investment income (describe	7	
0	MAY E e > e	8a	Gross amount from sales of assets other (A) Securities (B) Other	, 1 thing	
Z	e n		than inventory 14,054,791 8a		
Ø	SCANNED	b	Less cost or other basis and sales expenses 11,849,697 8b	195	
7	Z	С	Gain or (loss) (attach schedule) 2, 205, 094 8c		
1	T.	d	Net gain or (loss) (combine line 8c, columns (A) and (B)) SEE STMT 2	8d	2,205,094
a	స్త	9	Special events and activities (attach schedule) If any amount is from gaming, check here	12 pr 3	
•	177	a	Gross revenue (not including \$ 59,091 of SEE WORKSHEET		
		١.	contributions reported on line 1a) Qa 69,686 Less direct expenses other than fundraising expenses 9b 62,492		
		b	3.00	1 1	7,194
		10a	Net income or (loss) from special events (subtract line 9b from line 9a) Gross sales of inventory, less returns and allowances 10a 2,135,774	9c	
		b	Less cost of goods sold 10b 1,620,747		
		C	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) STMT 3	10c	515,027
		11	Other revenue (from Part VII, line 103)	11	3,556,919
		12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	89,106,815
	E	13	Program services (from line 44, column (B))	13	74,773,420
	E x p e	14	Management and general (from line 44, column (C))	14	7,904,742
	e n	15	Fundraising (from line 44, column (D))	15	722,075
	s	16	Payments to affiliates (attach schedule)	16	
	e _s	17.	Total expenses (add lines 16 and 44, column (A))	17	83,400,237
	A	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	<u>5,706,578</u>
	N s		Net assets or fund balances at beginning of year (from line 73, column (A))	19	42,095,924
	ее t t		Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 4	20	-588,497
	_ s	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	47,214,005
	For Inst	truction	Act and Paperwork Reduction Act Notice, see the separate s		Form 990 (2004)
	- INF	•			

Part II. Statement of All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations Functional Expenses and section 4947(a)(1) nonexempt charitable trusts but optional for others (See page 22 of the instructions) Do not include amounts reported on line (B) Program (C) Management (A) Total (D) Fundraising 6b, 8b, 9b, 10b, or 16 of Part I services and general STMT 5 22 Grants and allocations (attach schedule) 27542516 cash \$ 27,542,516 27,542,516 22 23 Specific assistance to individuals 23 24 Benefits paid to or for members 24 612,750 612,750 25 Compensation of officers, directors, etc 25 24,501,362 20,815,472 208,099 477,791 26 Other salaries and wages 26 1,320,147 1,060,229 235,065 24,853 27 27 Pension plan contributions 4,737,388 3,667,778 976,111 93,499 28 28 Other employee benefits 1,756,866 1,456,050 266,835 33,981 29 Payroll taxes 29 30 Professional fundraising fees 30 Accounting fees 31 32 32 Legal fees 3,374,520 3,171,690 187,361 15,469 33 Supplies 33 274,930 169,086 102,776 3,068 Telephone 34 128,855 340,807 206,991 4,961 35 Postage and shipping 35 36 36 Occupancy 686,522 534,295 143,630 8,597 Equipment rental and maintenance 37 323,652 385,313 39,112 22,549 Printing and publications 38 38 5<u>,</u>858 1,382,074 1,242,110 134,106 39 Travel 39 40 Conferences, conventions, and meetings 40 1,980,295 1,954,128 26,167 41 Interest 41 3,061,398 2,992,677 68,721 42 Depreciation, depletion, etc (attach schedule) 42 43 Other expenses not covered above (itemize) a 43a 11,443,349 9,636,746 1,775,154 SEE STATEMENT 6 31,449 4<u>3</u>b 43c C d 43d 43e 44 Total functional expenses (add lines 22 - 43) Organizations 74,773,420 7,904,742 completing columns (B)-(D), carry these totals to lines 13 1544 83,400,237 722,075 Joint Costs. Check ▶ I If you are following SOP 98-2 Yes X No Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? If "Yes," enter (i) the aggregate amount of these joint costs , (ii) the amount allocated to Program services\$ (III) the amount allocated to Management and general and (IV) the amount allocated to Fundraisin Statement of Program Service Accomplishments (See page 25 of the instructions.) Program Service What is the organization's primary exempt purpose? Expenses ▶ HIGHER EDUCATION (Required for 501(c)(3) & All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number (4) orgs, & 4947(a)(1) trusts, but optional for of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.) others) SEE STATEMENT 7 52,068,422 27,542,516 (Grants and allocations ACADEMIC SUPPORT (Grants and allocations 848,748 STUDENT SERVICES (Grants and allocations 3,471,743 O/M PLANT 5,628,798 (Grants and allocations SEE STMT 8 12,755,709 (Grants and allocations e Other program services (attach schedule) 74,773,420 Total of Program Service Expenses (should equal line 44, column (B), Program services) Form 990 (2004)

Part IV Balance Sheets (See page 25 of the instructions.)

Note.	· · · ·	in the descri	ption	(A)		(B)
	column should be for end-of-year amounts only			Beginning of year		End of year
45	Cash-non-interest-bearing			5,730	45	535,74
46	Savings and temporary cash investments		-	11,240,414	46	2,498,45
		1 1	4 540 654	1	1.16	
47a	Accounts receivable	47a	4,742,654	2 565 465	- '	2 252 25
b	Less allowance for doubtful accounts	47 <u>b</u>	1,682,700	3,565,465	47c	3,059,95
		1.16			ž.	
48a	Pledges receivable	48a	1,555,910	1 255 040	1 -	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
b	Less allowance for doubtful accounts	48b	423,487	1,355,849		1,132,42
49	Grants receivable		}		49	
50	Receivables from officers, directors, trustees, and key e	employees				
	(attach schedule)		-		50	
51a	Other notes and loans receivable (attach	11	2 026 000	l e	1.5	
	schedule) SEE WORKSHEET	51a	2,036,808	1 550 040		1 510 2
b	Less allowance for doubtful accounts	51b	517,500	1,558,842		1,519,30
52	Inventories for sale or use		H	566,539	52	552,4
53	Prepaid expenses and deferred charges	⊾ 5	a 57 l	749,652	53	649,8
54	Investments-securities SEE STATEMENT 9	▶ [2	X Cost X FMV	12,999,369	54	20,950,8
55a	Investments-land, buildings, and	1 . 1			ું દ	
	equipment basis	55a			+ ‡	
b					1	
	schedule)	55b	E STMT 10		55c	4 067 0
56	Investments-other (attach schedule)	1 1		844,950	56	4,967,0
57a	Land, buildings, and equipment basis	57a	86,201,125		- S	
þ	Less accumulated depreciation (attach		26 410 052	E9 343 904		FO 701 0
	schedule) SEE STATEMENT 11	57b	26,419,852	58,342,884 2,351,672		59,781,2
58	Other assets (describe SEE STATEMENT	12) 	2,331,012	58	2,485,5
59	Total assets (add lines 45 through 58) (must equal lin	o 74\		93,581,366	59	98,132,9
60	Accounts payable and accrued expenses	<u> </u>		15,223,123	60	15,789,2
61	Grants payable and accided expenses		ľ		61	237.0372
62		EE STAT	EMENT 13	1,908,530	62	1,668,5
63	Loans from officers, directors, trustees, and key employ				- 1	2700073
"	schedule)	ees (attacii			63	
64a	Tax-exempt bond liabilities (attach schedule)	SEE	WORKSHEET	28,060,000		26,950,0
Ь р	Mortgages and other notes payable (attach schedule)	· -	WORKSHEET	1,400,191		1,286,6
65	Other liabilities (describe SEE STATEMENT)	4,893,598	65	5,224,5
"	Other habilities (depolities +		′		-	
66	Total liabilities (add lines 60 through 65)			51,485,442	66	50,918,8
		and complet	e lines			
""	67 through 69 and lines 73 and 74				- -	
67	Unrestricted			25,156,727	67	28,603,0
68	Temporarily restricted			5,343,539	68	6,470,3
69	Permanently restricted			11,595,658	69	12,140,6
	enizations that do not follow SFAS 117, check here	▶ ∏ and	Ī		3.5	<u> </u>
	complete lines 70 through 74				-	
70	Capital stock, trust principal, or current funds				70	
71	Paid-in or capital surplus, or land, building, and equip	ment fund	Ī		71	<u> </u>
72	Retained earnings, endowment, accumulated income,		nds		72	
73	Total net assets or fund balances (add lines 67 through		T			
•	70 through 72,			ļ		
•	column (A) must equal line 19, column (B) must equa	al line 21)		42,095,924	73	47,214,0
1	, ,	/	73)	93,581,366	74	98,132,9

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

DAA

			OF FINDLAY enue per Audi	ted	Par		econciliation of			
			with Revenue				nancial Statem	ents '	with Exp	enses per
<u> </u>			f the instructions	1 14			eturn	Т	1.5. 1.6	. 11 - 1 - 1
а	Total revenue, gains, and		N N	32,389		Total expenses a	· ·			ـــــــــــــــــــــــــــــــــــــ
	per audited financial state		a 03,0.			audited financial	d on line a but not		a	37,73 4 ,7±0
b	Amounts included on line	a but not on				on line 17, Form		1		
/43	line 12, Form 990	İ				Donated services				
(1)	Net unrealized gains on	J			٠,	of facilities \$	and use	:		발발 교육 그림
(2)	investments \$					Prior year adjusti	ments			
(2)	Donated services and use	.	i Bland D		• •	reported on line			Tel (Tiple fo	
(2)	of facilities \$	_ 		5,4		Form 990 \$	20,	3	왕	
(3)	Recoveries of prior					Losses reported	on line 20			
(4)	year grants \$				٠,	Form 990 \$	on me 20,		F 1977 -	
(4)	Other (specify)	.		[, #7727] []		Other (specify)			و من المراقع ا المراقع والمراقع المراقع المرا	
	•	l _e		1944-8	(4)	Other (openity)				معجد فالمناهد والرباد الشرورات والمرسولية والمراكز المراكز ال
	Add amounts on lines (1) t	through (4)	ь	, , , , , , , , , , , ,		\$		ĺ		
	Add amounts on mes (1)	illough (4)	<u> </u>			ـــــ Add amounts on	lines (1) through (4)	ightharpoonup	b ,	
_	Line a minus line b	•	63.8	32,389		Line a minus line	.,	•	c !	57,794,716
d	Amounts included on line	12	1 2 du / 5 m	4 1- , 4		Amounts include		ſ	13-14-1	444EL2 & HILLE
_	Form 990 but not on line a	ľ		* * * * * * * * * * * * * * * * * * * *		Form 990 but no				ing Panggh 19
/11	Investment expenses	:				Investment exper		[:		
(' '	not included on line	ļ.			` '	not included on		i		
	6b, Form 990 \$			11 11 1		6b, Form 990 \$		[;		
(2)	Other (specify)		중부분 원달한	diagn in		Other (specify)				7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(-,	* * * * * * * * * * * * * * * * * * * *	STMT 15		- 14 - 15 - 15 - 15 - 15 - 15 - 15 - 15	` '	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	SEE STMT	16		
	s 2	5,274,426				\$	25,605,	521		
	Add amounts on lines (1) a		d 25,2	74,426		Add amounts on	lines (1) and (2)	•	d :	25,605,521
е	Total revenue per line 12,	` ' [e	Total expenses p	per line 17, Form 990) [
	(line c plus line d)	▶	e 89,1	06,815		(line c plus line	d)		е :	83,400,237
Pa	irt'V. List of Offic	ers, Directors	, Trustees, and	Key Em	ploy	ees (List each c	ne even if not compe	ensate	d, see page	27 of
	the instructions)								
	(4)	Name and address				le and average week devoted to	(C) Compensation (If not paid, enter	(D) emplo	Contrib to yee benefit & deferred pensation	(E) Expense account and other
	(A)	Name and address			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	position	-0-)	plans	& deterred pensation	allowances
				İ						
SI	EE STATEMENT 17	7	· -							
							•			
	- -									
				1		ı				ł
										<u> </u>
				1						
										
										
										
										
				ļ.						L
75	Did any officer, director, tr	rustee, or kev emn	plovee receive aggr	egate comp	ensat	ion of more than	\$100,000 from your			}

If "Yes," attach schedule-see page 28 of the instructions

Form	990 (2004) THE UNIVERSITY OF FINDLAY 34-4431	169		F	Page 5
	ort VI Other Information (See page 28 of the instructions.)			Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detail	ed description of			
•	each activity	·	76		Х
77	Were any changes made in the organizing or governing documents but not reported to the IRS?		77		X
	If "Yes," attach a conformed copy of the changes			477	14.54
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	by this return?	78a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," a	ttach a			
	statement		79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) thro	ugh common	1	4-1	=2,11
	membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization		80a		X
b	If "Yes," enter the name of the organization		100	1 100	p == 1 / 1
	and check whether it is exe	mpt or nonexempt	136		77.11
81a	Enter direct and indirect political expenditures. See line 81 instructions	81a	Pirina.	95 A 5 G T	2
b	Did the organization file Form 1120-POL for this year?	N/A	81b		L
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no cha	arge	1	ł	
	or at substantially less than fair rental value?		82a	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as			rasal di maj	13 17
	revenue in Part I or as an expense in Part II (See instructions in Part III)	82b	<u>#</u> 11 €	140 G	2 to 2 to
83a	Did the organization comply with the public inspection requirements for returns and exemption applica	tions?	83a	Х	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		83b	X	<u> </u>
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	N/A	84a		
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	าร	A 1 - 1	435	5 45 B
	or gifts were not tax deductible?	N/A	84b		
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	N/A	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	N/A	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	ation		12 July 12 Jul	
	received a waiver for proxy tax owed for the prior year		1 1 1	1217	ا الله الله الله الله الله الله الله ال
c	Dues, assessments, and similar amounts from members	85c]; [1-,-1-	0.5
d	Section 162(e) lobbying and political expenditures	85d	*1	15.0	
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e			ا دارد. در دارد.
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f] - +,	12111	14 THE
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line	85f to its		1	
	reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the fo				
	year?	N/A	85h		
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a	1:35	, t.	
b	Gross receipts, included on line 12, for public use of club facilities	86b] ' ',	[1] z	\$100 h
87	501(c)(12) orgs Enter a Gross income from members or shareholders	87a	- T.	10 m	-21
b	Gross income from other sources (Do not net amounts due or paid to other		T 11,	120 2	1 11
	sources against amounts due or received from them)	87b]	1119	写真
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation	n or	ļ		
	partnership, or an entity disregarded as separate from the organization under Regulations sections				
	301 7701-2 and 301 7701-39 If "Yes," complete Part IX		88	X	<u> </u>
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under		* ·	100	1 .7
	section 4911 ▶ 0 , section 4912 ▶ 0 , section 4955 ▶	0	i -	1. 1. 1. 1. 1.	42 Yr.,
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction	on	ĺ		
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," atta	ch			
	a statement explaining each transaction SEE ST	ATEMENT 18	89b	X	<u></u>
С	Enter Amount of tax imposed on the organization managers or disqualified persons during the year un	nder			
	sections 4912, 4955, and 4958	<u> </u>			0
d	Enter Amount of tax on line 89c, above, reimbursed by the organization	-			0
90a	List the states with which a copy of this return is filed NONE	1 1			
þ	Number of employees employed in the pay period that includes March 12, 2004 (See instructions)	90b			652
91	The books are in care of DANE ERFORD	Telephone no ▶ 419-		-45	24
	Located at ► FINDLAY, OH	ZIP+4 ► 45840-36	95		_
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here	. 1			▶ []
	and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 92			
			Form	990	(2004)

Part VII	Analysis of Income-Pro	<u>oducing Activities</u>	(See pag	<u>e 33 of the</u>	IIISH UCH	ons)			
Note. Enter	gross amounts unless otherwise			d business inc	1		by sec 51	2, 513, or 51	(E) Related or
indicated	3		(A)	(B) Amour		(C) xclusion	(D) ount	
	n service revenue	В	(A) usiness code	Amoúr I	nt E	xčlusior code	Am	oúnt	exempt function income
•	TION AND FEES								64,079,295
	ING HALL								3,223,114
·	MITORIES								4,399,653
		TTCC							
	ERCOLLEGIATE ATHLE	11CS							28,209
	ERINARY SERVICES								513,570
f Medicar	e/Medicaid payments	<u> </u>							ļ
g Fees an	d contracts from government agend	cies							
94 Member	ship dues and assessments								
95 Interest	on savings and temporary cash inve	estments				14	1	72,926	5
96 Dividend	ds and interest from securities					14		76,073	
	al income or (loss) from real estate		111111111111111111111111111111111111111	70 3545	. 15. 1	1 1	: - 4-1	+ + + + + + + + + + + + + + + + + + +	· 高州(1) 李字特 老
	anced property	-							
		<u></u>				16		37,841	
	t-financed property							<u> </u>	
	al income or (loss) from personal pr	openy							
	vestment income	ļ				10		05 004	
100 Gain or ((loss) from sales of assets other that	n inventory				18	2,2	05,094	
101 Net inco	me or (loss) from special events	<u> </u>							7,194
102 Gross pr	rofit or (loss) from sales of inventory			_ - _					515,027
103 Other re	evenue a								ļ. _
ь SAL	ES AND SERVICE OF	_					_		
c EDU	CATIONAL ENTERPRIS	ES							
	MISCELLANEOUS								
e INC									3,556,919
	(add columns (B), (D), and (E))	<u> </u>	18 LE - 14		0	- T 	2.6	91,934	
	dd line 104, columns (B), (D), and (E)	I						<u> </u>	79,014,915
•	, , , , ,	**	D-41					_	10,011,010
in the Section	5 plus line 1d, Part I, should equal : Relationship of Activiti			of Evenn	t Durne	200/8	00 0000	24 of the	instructions)
Part VIII			<u>iisiiiieiit</u>	OI Exemp	ruipos		ee page	34 OI IIIE	instructions)
Line No	i '	ich income is reported i	•			ımport	antly to the	accomplis	shment
Line No	of the organization's exempt purp	•	•			ımport	antly to the	accomplis	shment
_	i '	•	•			ımport	antly to the	accomplis	shment
_	of the organization's exempt purp	•	•			Import	antly to the	e accomplis	shment
_	of the organization's exempt purp	•	•			Import	antly to the	e accomplis	shment
_	of the organization's exempt purp SEE STATEMENT 19	oses (other than by pro	viding funds	for such purp	ooses)				
_	of the organization's exempt purp	oses (other than by pro	viding funds	for such purp	ooses)				
Part IX	of the organization's exempt purp SEE STATEMENT 19 Information Regarding T (A)	oses (other than by prov	ies and I	for such purp Disregardo (C)	ed Entiti		ee page	34 of the	instructions) (E)
Part IX	of the organization's exempt purp SEE STATEMENT 19 Information Regarding T (A) dress, and EIN of corporation,	Taxable Subsidiar (B) Percentage of	ies and I	for such purp	ed Entiti		ee page	34 of the	instructions) (E) End-of-year
Part IX	of the organization's exempt purp SEE STATEMENT 19 Information Regarding T (A)	Taxable Subsidiar (B) Percentage of ownership interest	ies and I	for such purp Disregardo (C)	ed Entiti		ee page	34 of the	instructions) (E)
Part IX	of the organization's exempt purp SEE STATEMENT 19 Information Regarding T (A) dress, and EIN of corporation, eship, or disregarded entity	Taxable Subsidiar (B) Percentage of ownership interest	ies and I	for such purp Disregardo (C)	ed Entiti		ee page	34 of the	instructions) (E) End-of-year
Part IX	of the organization's exempt purp SEE STATEMENT 19 Information Regarding T (A) dress, and EIN of corporation, eship, or disregarded entity	Taxable Subsidiar (B) Percentage of ownership interest	ies and I	for such purp Disregardo (C)	ed Entiti		ee page	34 of the	instructions) (E) End-of-year
Part IX	of the organization's exempt purp SEE STATEMENT 19 Information Regarding T (A) dress, and EIN of corporation, eship, or disregarded entity	Taxable Subsidiar (B) Percentage of ownership interest	ies and I	for such purp Disregardo (C)	ed Entiti		ee page	34 of the	instructions) (E) End-of-year
Part IX	of the organization's exempt purp SEE STATEMENT 19 Information Regarding T (A) dress, and EIN of corporation, ship, or disregarded entity STATEMENT 20	Taxable Subsidiar (B) Percentage of ownership interest	ies and I	Disregarde (C) Nature of activ	ed Entiti	es (Se	ee page (D) Total inc	34 of the	instructions) (E) End-of-year assets
Part IX Name, add partner SEE	of the organization's exempt purp SEE STATEMENT 19 Information Regarding T (A) dress, and EIN of corporation, ship, or disregarded entity STATEMENT 20 Information Regarding T	Taxable Subsidiar (B) Percentage of ownership interest	ies and I	Disregarde (C) Nature of activ	ed Entiti	es (Se	ee page (D) Total inc	34 of the ome	instructions) (E) End-of-year assets
Name, add partner SEE	of the organization's exempt purp SEE STATEMENT 19 Information Regarding T (A) dress, and EIN of corporation, ship, or disregarded entity STATEMENT 20 Information Regarding T the organization, during the year, r	Taxable Subsidiar (B) Percentage of ownership interest	ies and I	Disregarde (C) Nature of active Personal E	ed Entiti vities Benefit C	es (Se	ee page (D) Total inc	34 of the ome	instructions) (E) End-of-year assets the instructions) Yes X No
Name, add partner SEE	of the organization's exempt purp SEE STATEMENT 19 Information Regarding T (A) dress, and EIN of corporation, ship, or disregarded entity STATEMENT 20 Information Regarding T	Taxable Subsidiar (B) Percentage of ownership interest	ies and I	Disregarde (C) Nature of active Personal E	ed Entiti vities Benefit C	es (Se	ee page (D) Total inc	34 of the ome	instructions) (E) End-of-year assets
Name, addedupartner SEE Part X.** (a) Did (b) Did	of the organization's exempt purp SEE STATEMENT 19 Information Regarding T (A) dress, and EIN of corporation, ship, or disregarded entity STATEMENT 20 Information Regarding T the organization, during the year, r the organization, during the year, p (es" to (b), file Form 8870 and Form	Taxable Subsidiar (B) Percentage of ownership interest ransfers Associate eceive any funds, directly on 4720 (see instructions)	ies and I	Disregarde (C) Nature of active Personal Ectly, to pay pron a personal	ed Entiti vities Benefit Cemiums on all benefit c	contract	ee page (D) Total inco	34 of the ome oage 34 of it contract?	instructions) End-of-year assets the instructions) Yes X No Yes X No
Name, addedupartner SEE Part X.** (a) Did (b) Did	of the organization's exempt purp SEE STATEMENT 19 Information Regarding T (A) dress, and EIN of corporation, ship, or disregarded entity STATEMENT 20 Information Regarding T the organization, during the year, r the organization, during the year, r the organization, during the year, p (es" to (b), file Form 8870 and Form Under penalties of perjury, I declare,	Taxable Subsidiar (B) Percentage of ownership interest ransfers Associate eceive any funds, directly on 4720 (see instructions), that I have example this	ies and I	Disregarde (C) Nature of active Personal Ectly, to pay pron a personal ding accompan	ed Entiti vities Benefit C emiums on al benefit c	Contral a persontract	ee page (D) Total inc cts (See onal benef)	34 of the ome oage 34 of it contract?	instructions) End-of-year assets the instructions) Yes X No Yes X No
Name, add partner SEE	of the organization's exempt purp SEE STATEMENT 19 Information Regarding T (A) dress, and EIN of corporation, ship, or disregarded entity STATEMENT 20 Information Regarding T the organization, during the year, r the organization, during the year, p (es" to (b), file Form 8870 and Form	Taxable Subsidiar (B) Percentage of ownership interest ransfers Associate eceive any funds, directly on 4720 (see instructions), that I have example this	ies and I	Disregarde (C) Nature of active Personal Ectly, to pay pron a personal ding accompan	ed Entiti vities Benefit C emiums on al benefit c	Contral a persontract	ee page (D) Total inc cts (See onal benef)	34 of the ome oage 34 of it contract?	instructions) End-of-year assets the instructions) Yes X No Yes X No
Name, add partner SEE Part X. (a) Did (b) Did Note If "Y	of the organization's exempt purp SEE STATEMENT 19 Information Regarding T (A) dress, and EIN of corporation, ship, or disregarded entity STATEMENT 20 Information Regarding T the organization, during the year, rethe organization, during the year, press to (b), file Form 8870 and Form Under penalties of perjury, I declare and belief, it is true, agreet, and can	Taxable Subsidiar (B) Percentage of ownership interest ransfers Associate eceive any funds, directly on 4720 (see instructions), that I have example this	ies and I	Disregarde (C) Nature of active Personal Ectly, to pay pron a personal ding accompan	ed Entiti vities Benefit C emiums on al benefit c	Contral a persontract	ee page (D) Total inc cts (See onal benef)	34 of the ome oage 34 of it contract?	instructions) (E) End-of-year assets the instructions) Yes X No Yes X No object of my knowledge s any knowledge
Name, add partner SEE Part X.** (a) Did (b) Did Note If "Y	of the organization's exempt purp SEE STATEMENT 19 Information Regarding T (A) dress, and EIN of corporation, ship, or disregarded entity STATEMENT 20 Information Regarding T the organization, during the year, rethe organization, during the year, press to (b), file Form 8870 and Form Under penalties of perjury, I declare and belief, it is true, agreet, and can	ransfers Associate eceive any premiums, directly of 4720 (see instructions) that I have examiped his implete Declaration of prep	ies and I	Disregarde (C) Nature of active Personal Ectly, to pay pron a personal ding accompan	ed Entiti vities Benefit C emiums on al benefit c	Contral a persontract	ee page (D) Total inc cts (See onal benef)	and to the preparer ha	instructions) (E) End-of-year assets the instructions) Yes X No Yes X No object of my knowledge s any knowledge
Name, add partner SEE Part X. (a) Did (b) Did Note If "Y	Information Regarding T (A) dress, and EIN of corporation, ship, or disregarded entity STATEMENT 20 Information Regarding T the organization, during the year, rethe organization, during the year, press to (b), file Form 8870 and Form Under penalties of perjury, I declare and belief, it is true, agreet, and considerable and belief, it is true, agreet, and considerable and belief.	ransfers Associate eceive any premiums, directly of 4720 (see instructions) that I have examiped his implete Declaration of prep	ies and I	Disregarde (C) Nature of active Personal Ectly, to pay pron a personal ding accompan	ed Entiti vities Benefit C emiums on al benefit c	Contral a persontract	ee page (D) Total inc cts (See onal benef)	34 of the ome oage 34 of it contract?	instructions) (E) End-of-year assets the instructions) Yes X No Yes X No object of my knowledge s any knowledge
Name, add partner SEE Part X.** (a) Did (b) Did Note If "Y	Information Regarding T (A) dress, and EIN of corporation, ship, or disregarded entity STATEMENT 20 Information Regarding T the organization, during the year, rethe organization, during the year, press to (b), file Form 8870 and Form Under penalties of perjury, I declare and belief, it is true, agreet, and considered the signature of efficer Manning	ransfers Associate eceive any premiums, directly of 4720 (see instructions) that I have examiped his implete Declaration of prep	ies and I	Disregarde (C) Nature of active Personal Ectly, to pay pron a personal ding accompan	ed Entiti vities Benefit C emiums on al benefit c	Contral a persontract	ee page (D) Total inc cts (See onal benef)	and to the preparer ha	instructions) (E) End-of-year assets the instructions) Yes X No Yes X No object of my knowledge s any knowledge
Name, add partner SEE Part X.** (a) Did (b) Did Note If "Y	Information Regarding T (A) dress, and EIN of corporation, ship, or disregarded entity STATEMENT 20 Information Regarding T the organization, during the year, rethe organization, during the year, press to (b), file Form 8870 and Form Under penalties of perjury, I declare and belief, it is true, agreet, and considerable and belief, it is true, agreet, and considerable and belief.	ransfers Associate eceive any premiums, directly of 4720 (see instructions) that I have examiped his implete Declaration of prep	ies and I	Disregarde (C) Nature of active Personal Ectly, to pay pron a personal ding accompan	ed Entiti vities Benefit C emiums on al benefit c	Contral a persontract	ee page (D) Total inc cts (See onal benefit) statements, on of which	and to the preparer ha	instructions) (E) End-of-year assets the instructions) Yes X No Yes X No No No No No No No No No No No No No
Name, add partner SEE Part X.** (a) Did (b) Did Note If "Y	Information Regarding T (A) dress, and EIN of corporation, ship, or disregarded entity STATEMENT 20 Information Regarding T the organization, during the year, rethe organization, during the year, process to (b), file Form 8870 and Form Under penalties of perjury, I declare and belief, it is true, agreet, and considered the street of afficer Signature of afficer Type or print name and title	ransfers Associate eceive any premiums, directly of 4720 (see instructions) that I have examiped his implete Declaration of prep	ies and I	Disregarde (C) Nature of active Personal Ectly, to pay pron a personal ding accompan	Benefit Cemiums on all benefit countries	Contral a persontract	cts (See onal benefice of which	and to the breparer ha	instructions) End-of-year assets the instructions) Yes X No Yes X No No No No No No No No No No No No No
Name, add partner SEE Part X.** (a) Did (b) Did Note If "Y	Information Regarding T (A) dress, and EIN of corporation, ship, or disregarded entity STATEMENT 20 Information Regarding T the organization, during the year, reserving to (b), file Form 8870 and Form Under penalties of perjury 1 declare and belief, it is true, agreed, and constitution of fifteer Signature of fifteer Type or print name and title	ransfers Associate eceive any premiums, directly of 4720 (see instructions) that I have examiped his implete Declaration of prep	ies and I	Disregarde (C) Nature of active Personal Ectly, to pay pron a personal ding accompan	Benefit Cemiums on all benefit countries	contractions and informations and inform	cts (See onal benefits)	and to the breparer ha	instructions) End-of-year assets the instructions) Yes X No Yes X No No No No No No No No No No No No No
Name, added partner SEE Part X.** (a) Did (b) Did Note if "Y Please Sign Here	Information Regarding T (A) dress, and EIN of corporation, ship, or disregarded entity STATEMENT 20 Information Regarding T the organization, during the year, or the organization, during the year, or the organization, during the year, or the organization, during the year, or the organization, during the year, or the organization, during the year, or the organization, during the year, or the organization, during the year, or the organization, during the year, or the organization, during the year, or the organization of perjury 1 declare and belief, it is true, porrect, and company the year or the organization of perjury 1 declare and belief, it is true, porrect, and company the year or perjury 1 declare and belief, it is true, porrect, and company the year or perjury 1 declare and belief, it is true, porrect, and company the year or perjury 1 declare and belief, it is true, porrect, and company the year. Signature of officer and the year or perjury 1 declare and belief, it is true, porrect, and company the year. Provided the year of the year or the organization of the year or the organization of the year or the organization of the year or the organization of the year or the organization of the year or the organization of the year or	ransfers Associate eceive any premiums, directly of 4720 (see instructions) that I have examiped this implete Declaration of prep	ies and I	Disregarde (C) Nature of active Personal E titly, to pay pr on a personal an officer) is b	Benefit Cemiums on all benefit countries	Contral a persontract	cts (See onal benefice of which	and to the topreparer had 19-6-1	instructions) End-of-year assets the instructions) Yes X No Yes X No No No No No No No No No No No No No
Name, add partner SEE Part X.** (a) Did (b) Did Note If "Y Please Sign Here Paid Preparer's	Information Regarding T (A) dress, and EIN of corporation, ship, or disregarded entity STATEMENT 20 Information Regarding T the organization, during the year, rethe organization, during the year, rethe organization, during the year, press to (b), file Form 8870 and Form Under penalties of perjury 1 declare and belief, it is true, correct, and considered the signature of officer Type or print name and title Preparer's signature ROGER J. Firm's name (or yours PRY	Taxable Subsidiar (B) Percentage of ownership interest ransfers Associate eceive any funds, directly on 4720 (see instructions) that I have examined this inplete ordinary for preparation of preparation of preparation of preparation of preparation of preparation of preparation of preparation of preparation of preparation of preparation of preparation of preparation of preparation of preparation of preparation of preparation of preparations of preparations of preparations and preparations of preparations	ies and I % % % ted with I tty or indirectly, return, includarer (other th	Disregarde (C) Nature of active Personal Ectly, to pay pron a personal an officer) is be	Benefit Communication of the second s	Contraction of the contraction o	cts (See onal benefice of which	and to the breparer ha	instructions) End-of-year assets the instructions) Yes X No Yes X No No No No No No No No No No No No No
Name, added partner SEE Part X. (a) Did (b) Did Note If "Y Please Sign Here	Information Regarding T (A) dress, and EIN of corporation, ship, or disregarded entity STATEMENT 20 Information Regarding T the organization, during the year, or the organization or the organization or the organization or the year or the organization or the organization or the year, or the organization or the organization or the organization or the year or the organization or the year or the organization or the year or the year or the year or the year or the year or the year or the year or the year or the year or the year or the year or the year or the year or the year or the year or the year	ransfers Associate eceive any funds, directly of 4720 (see instructions) that I have examined this inplete Declaration of prep	ies and I % % % ted with I tty or indirectly, return, includarer (other th	Personal Ectly, to pay pron a personal an officer) is better the personal and the personal	Benefit Communication of the second s	Contraction of the contraction o	cts (See onal benefice of which	and to the transport of the preparer had been been been been been been been bee	instructions) End-of-year assets the instructions) Yes X No Yes X No No No No No No No No No No No No No

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),

Supplementary Information-(See separate instructions.)

501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

2004

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ Employer identification number

THE UNIVERSITY OF FINDLAY 34-4431169 Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instruction	ons List each one. If the	ere are none, enter "N	lone ")		
(a) Name and address of each employee pa than \$50,000	, , ,	tle and average hours eek devoted to position	(c) Compensation	(d) Contributions to empl ben plans & deferred comp	(e) Expense account and other allowances
JOHN CINDRIC					
1000 N. MAIN STREET	PROF.	OF EDUCATION			
FINDLAY OH 45	5840 40		196,311	26,303	0
NATALIE ABELL					
1000 N. MAIN STREET	PROF.	OF EDUCATION			
FINDLAY OH 45	5840 40		175,696	18,910	0
TED ALEX					
1000 N. MAIN STREET	ASSOC	.PROF OF MKTNG			
FINDLAY OH 45	5840 40		152,216	26,593	0
AHMED EL-ZAYATY					
1000 N. MAIN STREET	PROF.	OF BUSINESS			
FINDLAY OH 45	5840 40		150,039	22,278	0
DENNIS MATHERN					
1000 N. MAIN STREET	PROF.	OF BUSINESS			
FINDLAY OH 45	840 40		<u>151,788</u>	17,925	0
Total number of other employees paid over		ŧ		1 (1 h 1 h 1 h 1 h 1 h 1 h 1 h 1 h 1 h 1	
\$50,000	▶ 167_		<u> </u>		7 * - 3 to 10 to 1

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of	the ins	tructions. List each one (whether indi	viduals or firms). If there are none, enter	"None.")
(a) Name and addre	ss of eac	n independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
SODEXHO				
1000 N. MAIN STREET				
FINDLAY	_ OH	45840	FOOD SERVICE	1,841,061
EXPONENT EVENT TECH	NOLOG	IES LLC		
2335 GLENEAGLES DR				
NAPERVILLE	_ IL	60565-5351	TECHNOLOGY/ADVERTIS	152,289
VAUGHN				
P O BOX 633286				
CINCINNATI	OH	45263-3286	CONSTRUCTION	113,213
CHARLES HIPP CPA		-		
595 EMERALD CT				
AURORA	OH	44202	AUDITING	112,502
MICHAEL WEBBER				
2041 GREYSTONE DR				
FINDLAY	OH	45840	SEEM/TRAINER	78,701
Total number of others receiving ov	er \$50,0	000 for		
professional services	_	3		<u> </u>

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

Schedule A (Form 990 or 990-EZ) 2004

Sche	hedule A (Form 990 or 990-EZ) 2004 THE UNIVERSITY OF FINDLAY 34-44311	69			Page
P	Part III.: Statements About Activities (See page 2 of the instructions.)			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any				
	attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid				
	or incurred in connection with the lobbying activities \$ (Must equal amounts on line 38,		- 1		1
	Part VI-A, or line i of Part VI-B)		1	<u> </u>	Х
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other			(-,	10 E
	organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of		1-7-	-	1
	the lobbying activities	1		2 1 1 1 2 1 1 1 2 1 1 1 2 1 1 1 2 1 1 1 2 1	214
2					1
	substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or		3 30	1 21	-32
	with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the		1 · · ·	13.73	14 15 E
	transactions)		1		3
	transactions y		14.	82	
а	Sale, exchange, or leasing of property?		2a		X
b	CEE CTATEMEN	VT 21	2b	Х	
С	CET CTATEMEN	NT 22	2c	Х	
d			2d	Х	
	SEE STATEMEN	NT 23	Ì		
е	Transfer of any part of its income or assets?		2e	<u> </u>	X
3а					
	you determine that recipients qualify to receive payments) SEE STATEMEN	JT 24	3a	X	—
þ			3b	X	├
4a					٠,
	on the use or distribution of funds?		4a 4b	┼─	X
_ <u>b</u>	Do you provide credit counseling, debt management, credit repair, or debt negotiation services? Part IV. Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.		40	Ь	1 1
The 5 6 7 8	e organization is not a private foundation because it is. (Please check only ONE applicable box.) A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i) X A school Section 170(b)(1)(A)(ii). (Also complete Part V.) A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii). A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)				
9	A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital	s name, city	' ,		
	and state ►				
10	An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section	170(b)(1)(A	i)(IV)		
11a		public Section	on		
446	170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)				
11b 12		d aross			
' -	receipts from activities related to its charitable, etc., functions-subject to certain exceptions, and (2) no more than 33	-			
	its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses				
	by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A)	- a-q			
13		anızatıons			
	described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) section 509(a)(3))	(See			
	Provide the following information about the supported organizations. (See page 5 of the inst	ructions)			
	(a) Name(s) of supported organization(s)	((b) Line	numb	er
	(a) Name(s) of Supported Organization(s)		from a	bove	
		1			
					—
					—
1.4	As accountation are an and and accounted to the state of the Contract Contr				
4	An organization organized and operated to test for public safety. Section 509(a)(4) (See page 5 of the instructions.)				

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting (d) 2000 (e) Total (a) 2003 **(b)** 2002 Calendar year (or fiscal year beginning in Gifts, grants, and contributions received (Do not include unusual grants. See line 28.) 16 Membership fees received 17 Gross receipts from admissions, merchandissold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose Gross income from interest, dividends. amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 Net income from unrelated business activities not included in line 18 20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge Other income Attach a schedule Do not include gain or (loss) from sale of capital assets Total of lines 15 through 22 23 24 Line 23 minus line 17 Enter 1% of line 23 Organizations described on lines 10 or 11. a Enter 2% of amount in column (e), line 24 26<u>a</u> b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts 26b c Total support for section 509(a)(1) test Enter line 24, column (e) 26c d Add Amounts from column (e) for lines 19 26d e Public support (line 26c minus line 26d total) 26e Public support percentage (line 26e (numerator) divided by line 26c (denominator)) Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" N/ADo not file this list with your return. Enter the sum of such amounts for each year (2002)(2001)b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess N/A amounts) for each year (2003)(2000)c Add Amounts from column (e) for lines 27c d Add Line 27a total and line 27b total 27d e Public support (line 27c total minus line 27d total) 27e f Total support for section 509(a)(2) test Enter amount from line 23, column (e) g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 27a Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) Unusual Grants. For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief

description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

Schedule A (Form 990 or 990-EZ) 2004 THE UNIVERSITY OF FINDLAY 34-4431169 Page 4 Part V Private School Questionnaire (See page 7 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)

—	(10 be completed ONL) by schools that checked the box on line of it i art iv)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,		Yes	No
	other governing instrument, or in a resolution of its governing body?	29	Х	<u> </u>
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its] -:	- '	
	brochures, catalogues, and other written communications with the public dealing with student admissions,		. 121	
	programs, and scholarships?	30	Х	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during	- ,- ',-		- 5
٠.	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way	- 47°	. '	- 4,
		31	X	, ,
	that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)	379.00		¥ -
	CLEARLY DEFINED IN ALL UNIVERSITY LITERATURE.	1,51,5	7	7 .1.
		1,12,72	100	11-1
		4	5 1 2	15 3 F
		1 , , = ,	#J#12-	111
32	Does the organization maintain the following		1.1	-200
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	Х	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory	-		
ь		201	Х	i
	basis?	32b		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	32c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	X	
		3	, ,	10 h
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)	15.	-5+ -5-	2,7
			1.15	itt -
		[-] -	9-5	
33	Does the organization discriminate by race in any way with respect to	٠, ٠,	2 2	125
55	bues the diganization discriminate by race in any way with respect to		- -	13
		,		\ \v_
а	Students' rights or privileges?	33a_		X
				37
b	Admissions policies?	33b		X
С	Employment of faculty or administrative staff?	33c		X
				1
d	Scholarships or other financial assistance?	33d		X
		i		
е	Educational policies?	33e		Х
f	Use of facilities?	33f		Х
•	S. S. A. Miller	-		
_	Athletic programs?	33a	l	Х
y	Athletic programs	33g		
				7.7
h	Other extracurricular activities?	33h	ļ	X
		(. '	(* · ·	[] P
	If you answered "Yes" to any of the above, please explain (If you need more space, atlach a separate statement)	100	F.	1 -
			1 :	٠ - ،
		,	1.2	- 1
		1	1.70	1 : :
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	Х	
	- ,			
b	Has the organization's right to such aid ever been revoked or suspended?	34b		X
_	If you answered "Yes" to either 34a or b, please explain using an attached statement SEE STATEMENT 25	1 77		
	,	<u> </u>		
35	Door the executation contifus that it has complied with the applicable recoverage of each and 4.04 the such 4.05			- '
33	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05		47	
	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	X	<u> </u>

009118 05/15/2006 3 02 PM Schedule A (Form 990 or 990-EZ) 2004 THE UNIVERSITY OF FINDLAY Page 5 Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.) Part VI-A (To be completed ONLY by an eligible organization that filed Form 5768) if you checked "a" and "limited control" provisions apply Check ▶ b ▶ if the organization belongs to an affiliated group (a) (b) Limits on Lobbying Expenditures Affiliated group totals To be completed for ALL electing organizations (The term "expenditures" means amounts paid or incurred) 36 36 Total lobbying expenditures to influence public opinion (grassroots lobbying) 37 Total lobbying expenditures to influence a legislative body (direct lobbying) 38 Total lobbying expenditures (add lines 36 and 37) 39 39 Other exempt purpose expenditures 40 40 Total exempt purpose expenditures (add lines 38 and 39) 41 Lobbying nontaxable amount Enter the amount from the following table-The lobbying nontaxable amount is-If the amount on line 40 is-Not over \$500,000 20% of the amount on line 40 \$100,000 plus 15% of the excess over \$500,000 Over \$500,000 but not over \$1,000,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000 42 42 Grassroots nontaxable amount (enter 25% of line 41) 43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38 44 ī 1 Caution. If there is an amount on either line 43 or line 44, you must file Form 4720 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 11 of the instructions) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or (b) (c) (e) (a) fiscal year beginning in) 2004 2003 2002 2001 Total 45 Lobbying nontaxable amount 46 Lobbying ceiling amount (150% of line 45(e)) 47 Total lobbying expenditures 48 Grassroots nontaxable amount `_[;_ 49 Grassroots ceiling amount (150% of line 48(e)) 50 Grassroots lobbying expenditures Part VI-B **Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

Volunteers

- Paid staff or management (Include compensation in expenses reported on lines c through h)
- Media advertisements
- Mailings to members, legislators, or the public
- Publications, or published or broadcast statements
- Grants to other organizations for lobbying purposes
- Direct contact with legislators, their staffs, government officials, or a legislative body
- Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- Total lobbying expenditures (Add lines c through h.)

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Yes	No	Amount
	X	[1] () () () () () () () () () (
	X	
	X	
	X	
	X	
	X	
	X	
	X_	
_	3 0	

Schedule A (Form 990 or 990-EZ) 2004

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 11 of the instructions.)

51	Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section
	501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

- a Transfers from the reporting organization to a noncharitable exempt or
 - (I) Cash
 - (ii) Other assets
- **b** Other transactions
 - (i) Sales or exchanges of assets with a noncharitable exempt organ
 - (II) Purchases of assets from a noncharitable exempt organization
 - (iii) Rental of facilities, equipment, or other assets
 - (IV) Reimbursement arrangements
 - (v) Loans or loan guarantees
 - (vi) Performance of services or membership or fundraising solicitatio
- c Sharing of facilities, equipment, mailing lists, other assets, or paid em

d If the answer to any of the above is "Yes," complete the following schegoods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any

rganization of		Yes N
	51a(i)	X
	a(ii)	X
	1 1	1
nization	_b(i)	X
	_b(II)	X
	b(iii)	_ X
	b(iv)	X
	b(v)	X
ns	_b(vi)	X
ployees	С	X

transaction of	or sharing arrangement	show in column (d) the value of the goods, othe	r assets, or services received
(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			
			<u> </u>
			· · · · · · · · · · · · · · · · ·
			
			
			
			
2a Is the organi	ration directly or indus	active officiated with an related to one or more to	v evernt erganizations
-	•	ectly affiliated with, or related to, one or more ta Code (other than section 501(c)(3)) or in section 5	

described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

b If "Yes," complete the following schedule			
(a) Name of organization	(b) Type of organization	(c) Description of relationship	
N/A			
			
	+		 _
			
	 		
			

5/15/2006 3:01 PM

009118 THE UNIVERSITY OF FINDLAY
34-4431169 Federal Statements 34-4431169

FYE: 6/30/2005

Form 990, Part I, Line 1a - Direct Public Support

Description	_	Cash		Noncash	_	Total
CONTRIBUTIONS LESS THAN \$5000 TOTAL CONTRIBUTIONS FROM EVENTS	\$	950,182 59,091	\$	125,831	\$	1,076,013 59,091
OTHER CONTRIBUTIONS		1,364,155		906,433		2,270,588
TOTAL	\$	2,373,428	\$_	1,032,264	\$_	3,405,692

Form 990, Part I, Line 1b - Indirect Public Support

Description		Cash		Noncash	 Total
OTHER CONTRIBUTIONS	\$_	93,951	\$		\$ 93,951
TOTAL	\$	93,951	\$_	0	\$ 93,951

Form 990, Part I, Line 1c - Government Contributions

Description		Cash	<u>Noncash</u>		Total
GOVERNMENT GRANTS	\$	5,214,815	\$	\$	5,214,815
OTHER CONTRIBUTIONS	_	1,377,442			1,377,442
TOTAL	\$_	6,592,257	\$0	\$=	6,592,257

009118 THE UNIVERSITY OF FINDLAY **Federal Statements** 34-4431169

FYE: 6/30/2005

Schedule A, Part V, Line 31 - Publication of Nondiscriminatory Policy

CLEARLY DEFINED IN ALL UNIVERSITY LITERATURE.

Statement 25 - Schedule A, Part V, Line 34 - Governmental Financial Aid

GOVERNMENT AGENCY ASSISTANCE; U.S. DEPARTMENT OF EDUCATION

FEDERAL PELL GRANT PROGRAM, FEDERAL PERKINS LOAN PROGRAM, FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT PROGRAM, FEDERAL WORK STUDY PROGRAM, EMERGENCY RESPONSE AND CRISIS MANAGEMENT PROGRAM, BILINGUAL EDUCATION-PROFESSIONAL DEVELOPMENT, PREPARING TEACHERS TO USE TECHNOLOGY PROGRAM.

- U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTER FOR DISEASE CONTROL AND PREVENTION, BIOTERRORISM & DISASTER PREPAREDNESS TRAINING PROGRAM, PUBLIC HEALTH WORKFORCE CURRICULUM DEVELOPMENT AND IMPLEMENTATION PROGRAM, HEALTH CARE FACILITIES AND OTHER CONSTRUCTION PROGRAM.
- U.S. DEPARTMENT OF LABOR SUSAN HARWOOD TRAINING GRANT PROGRAM 2003, SUSAN HARWOOD TRAINING GRANT PROGRAM 2004.

009118 05/15	/2006 3 02 PM									•
		· <u> </u>	S	pecial Eve	ents S	chedule				
Form	990								6/30/05	2004
L Name		For calend	ar year 2004, or tax year	beginning		7/01/04 ,	and ending			ntification Number
									J	
THE UN	NIVERSI	I'Y OF	FINDLAY			(0)			34-4431	
			(A)	(B)		(C)		Ott	ners	Total
Gross recei	pts		_128,777		0		0		0	128,777
	tributions		59,091		0		0		0	59,091
Gross rever	nue		69,686		0		0		0	69,686
Less dire	ct expenses		62,492		0		0		0	62,492
Net income	(loss)		7,194		0		<u> </u>		0	7,194
Description	(A)	GOLI	F OUTING			_				
·	` '					_				
	(B)					_				
	(C)									
	(0)									
	Others					_			•	
				<u>-</u>		_				
						_				
						_				
		-								
						- -				
										
			 			_				
						_				
						_				
										
										
						_				
						<u> </u>				
				<u></u>		<u> </u>				
			·			_				
			<u> </u>			_				

Totals

### THE UNIVERSITY OF FINDLAY FORM 990, PART IV, LINE 51A - ADDITIONAL INFORMATION	009118 05/15/2006 3 02 PM			,,			
Porcelender year 2004, or tax year beginning		Oth	d Loans Receiva	ble		2004	
Employer Identification Number THE UNIVERSITY OF FINDLAY 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-431169 34-43	9907990-FF	For calendar year 2004, or t	ax vear beginning	7/01/04	, and ending	6/30/05	2004
### THE UNIVERSITY OF FINDLAY FORM 990, PART IV, LINE 51A - ADDITIONAL INFORMATION	Nàme	1 1 of calcinal year 2001, of t	an your bogining		,	1	ldentification Number
Name of borrower							
Name of borrower Relationship to disquarified person	THE UNIVERSITY	OF FINDLAY			· 	34-44	31169
Name of borrower Relationship to disquarified person	FORM 990 DART	' TV T.TNE: 51A -	ADDTTTONA	I INFORMATION	Ī		
LOAN RECEIVABLE	10101 330 , 111101	. 11/ 11111 0 111	11155111101111				
					Relationship to	disqualified pe	rson
33		ABLE					
	(2)	· -					
							
17 18 19 19 10 10 10 10 10 10	(5)						
39 109	(6)						
Original amount Date of loan Maturity Repayment terms Interest rate	(7)						·
Original amount Date of loan Maturity Repayment terms Interest rate							
Date of loan Maturity Repayment terms Interest rate	(10)						
Date of loan date Repayment terms rate	·阿克拉特企业等的企业。	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		STOREN TO SERVER STATE	alt in a factor	المورد المورد المورد المورد المورد المورد المورد المورد المورد المورد المورد المورد المورد المورد المورد المورد	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
22				F	Repayment terms		I
33	(1)						
(4)	(2)						
10	(3)						
Consideration furnished by lender Balance due at beginning of year end of year (930-PF only) (10) (11) (11) (12) (13) (14) (15)							
17	(6)						
Security provided by borrower	(7)						
Security provided by borrower	(8)						
Security provided by borrower	(9)						
Security provided by borrower		- Bith 32 145	, +), 8' T'	1 - 1 - 1 - 1 - 1 - 1 - 2 - 2 - 2 - 2 -	1,3 7,5 22	(14+ + 51+ + <u>X</u> -)	12. [] [] [] [] [] [] [] [] [] [
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Consideration furnished by lender Balance due at beginning of year end of year (990-PF only) 1,558,842 1,519,308 (4) (5) (6) (7) (8) (9) (1) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9)		unty provided by borrower			Purnor	o of loan	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Consideration furnished by lender Consideration furnished by lender 1,558,842 1,519,308 (2) (3) (4) (6) (6) (7) (8) (9)		anty provided by bottower			1 41703	Se of loan	
(3) (4) (5) (6) (7) (8) (9) (10) Consideration furnished by lender Balance due at beginning of year end of year end of year (990-PF only) 1,558,842 1,519,308 (2) (3) (4) (6) (6) (7) (8) (9)							·
(5) (6) (7) (8) (9) (10) Consideration furnished by lender Balance due at beginning of year end of year (990-PF only) 1,558,842 1,519,308 (4) (5) (6) (7) (8) (9)	(3)						
(6) (7) (8) (9) (10) Consideration furnished by lender Balance due at beginning of year end of year (990-PF only) 1,558,842 1,519,308 (2) (3) (4) (5) (6) (7) (8) (9)	(4)						
(7) (8) (9) (10) Consideration furnished by lender Balance due at beginning of year 1,558,842 1,519,308 (2) (3) (4) (5) (6) (7) (8) (9)	(5)						
(8) (9) (10) (10) (10) (10) (10) (10) (10) (10							
Consideration furnished by lender Balance due at beginning of year end of year (990-PF only)	(8)						
Balance due at beginning of year Balance due at end of year (990-PF only)	(9)						
Balance due at beginning of year Balance due at end of year Gentlement of year Gentle	(10) 	149 4. Ca. 1478 4. Salata (141 142)	द्या सुक्रांक्ष समिक्षाः	្នាត់ ព្រះក្រុស មិន មានប្រការ	jagi in ninga	F. M. ([1 57	anathar
Consideration furnished by lender beginning of year end of year (990-PF only) 1,558,842 1,519,308 2) (3) (4) (5) (6) (7) (8) (9)	15 me 2 2 pt 20 me 2 2 2 5 1 1 1 2 2 2 4 4 2 4 4 4 4 4 4 4 4 4 4 4	The Orange of the control of the control of the		#1. mare an e #4 3 - marely a ne ?			
(2) (3) (4) (5) (6) (7) (8) (9)	Considera	ition furnished by lender					
(3) (4) (5) (6) (7) (8) (9)	(1)			1,558,842	1,51	9,308	
(4) (5) (6) (7) (8) (9)	(2)	· 			 		<u> </u>
(5) (6) (7) (8) (9)							
(6) (7) (8) (9)	(5)						
(8) (9)	(6)						
(9)	(7)				 		· <u> </u>
	(8)				-		
	(10)				† · · · · · · · · · · · · · · · · · · ·	 -	

1,558,842

1,519,308

Totals

009118 05/15/2006 3 02 PM						
Forms	Mor	gages and Othe	er Notes Payal	ble	ı	2004
990 / 990-PF	F	tau waar baayaana	7/01/04	and onding	6/30/05	2004
l lame	For calendar year 2004, or	tax year beginning	7701704	, and ending		ntification Number
danic						
THE UNIVERSITY	OF FINDLAY				34-4431	169
TODY 000 DADE		3 DD TEET () 13 T	TATEODMA CITOR	T		
FORM 990, PART	IV, LINE 64B -	ADDITIONAL	INFORMATION			
	Name of lender			Relationship to	disqualified person	ı
1) MORTGAGES/OT	TH NOTES PAYABLE	(SEE ATTA				
2) CAPITAL LEAS	E OBLIGATIONS (SEE ATTAC				
3)						
5)				 		
5) 6)						
7)						
8)						
9)	<u>-</u>	· · · · · · · · · · · · · · · · · · ·				
10) '(() 동' 본()() (고)왕(구구구,)		(본1 등값님 : \$41 -g-** (-65	L Banks of the R	1 47 A 927 A.	ল প্রেডি	Hara Silversia S Second No. 1885
Original amount		Maturity	(4) 5-41 _ 48' 44 _ 25			Interest
borrowed	Date of loan	date		Repayment terms	·	rate
1)			 			
2) 3)						
4)						
5)						
6)					 	
7)		······································				·
8)						
9) 10)				· · · · · · · · · · · · · · · · · · ·		
B 。 物质 化10 并放散	(magnetic of the first of the sector of the	plus fight to the second first to the second f	The property of the second	37.35 - 1883 - 伊斯·		The state of the s
•				Duana		
· · ·	curity provided by borrower	 -		Purpose	e of loan	
1) 2)						
3)				 		
4)						
5)						
6)						
7) 8)						
9)	· · ·					
10)						
The control of the co	- 398 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1			
Conside	ration furnished by lender			ce due at ng of year		nce due at d of year
1)				059,225		1,037,090
2)				340,966		249,514
3)					 	
4) 5)	· · · · ·		<u> </u>			
6)						
7)						
8)						 -
9)		·····	<u> </u>			

1,286,604

1,400,191

Totals

009118 05/15/2006 3	02 PM						
Form 990			Tax-Exempt Bond	d Liabilities			2004
	For	calendar year 2004, or tax	year beginning	7/01/04	and ending	6/30/05	
Name		-				Employer	Identification Number
	Darmi					34-44	31169
THE UNIVE	RSITY	OF FINDLAY				34-44	31107
FORM 990,	PART	IV, LINE 64A -	ADDITIONAL I	NFORMATION			
		Name of lender			Purpose	of issue	
(1) TAX-EXE	MPT BO	OND LIABILITIES	S(SEE ATTA				
(2)							<u>.</u>
(3)							
(4)							
(5)							
(6)							
(7)							_ _
(8)							
(9)							
(10)	55700			Kar - 10- 1 -	# 14 11 1 4 King	14 25 6 81	1 15 12 5 21 82 25
Issue date		Original amount of issue	Form 8038 filed Y/N Date filed	Date retire	ed Complet		Unexpended bond proceeds
(1)			N				
(2)							
(3)							
(4)							
(5)							_ _
(6)							
(7)							
(8)							
(9)							
(10) ,		- 13 4 4 12 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$ 6.25	هوا في څخاه وداه ي		Control of the second
Third party use percent	-18 7 1 1	Maturity date		Repayment term		<u> </u>	Interest rate
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)	ر، شاشه . در، شاشه .			र्टा (हे के हें क्रिकेट प्रश्नेत	erta ji a li ji a		
(1 1 1 - (<u>M 2</u>) % +		eres - tonge - er - potentio - ton	- ye	24 104 - 2 164	Amount outsta		Amount outstanding
		Security provided by I	borrower		at beginning o	of year	at end of year
(1)					28,060	,000	26,950,000
(2)							
(3)							
(4)					 		
(5)					 		
(6)		 					
(8)							
(9)							
(10)							

28,060,000

26,950,000

009118 THE UNIVERSITY OF FINDLAY
34-4431169 Federal Statements

FYE: 6/30/2005

5/15/2006 3:01 PM

Statement 1 - Form 990, Part I, Line 6b - Rental Expenses

Description	Deduction
RENTAL PROPERTIES	
	253,756
TOTAL	253,756

5/15/2006 3:01 PM \$2,205,094 \$2,205,094 Gain/ -Loss N Deprec Statement 2 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Securities \$ 11849697 \$ \$ 11849697 \$ Cost & Expense VARIOUS VARIOUS \$ 14054791 \$ 14054791 Sale Price **Federal Statements** Date Sold Date Acquired Whom Sold 009118 THE UNIVERSITY OF FINDLAY Desc SALE OF SECURITIES PURCHASE How Rec'd FYE: 6/30/2005 TOTAL 34-4431169

5/15/2006 3:01 PM

009118 THE UNIVERSITY OF FINDLAY

34-4431169

Federal Statements

FYE: 6/30/2005

Statement 3 - Form 990, Line 10c - Sales of Inventory

Description	Gross Sales	COGS		Gross Profit
CAMPUS BOOKSTORE	\$ 2,135,774	\$ 1,620,747	\$_	515,027
TOTAL	\$ 2,135,774	\$ <u>1,620,747</u>	\$_	515,027

Statement 4 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
NET UNREALIZED LOSS ON INVESTMENTS	\$ -588,497
TATOT	\$ -588,497

009118 THE UNIVERSITY OF FINDLAY

34-4431169

Federal Statements

FYE: 6/30/2005

Statement 6 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
EXPENSES	\$	5	\$	\$
MISCELLANEOUS CONTRACTED FOOD SERVICES UTILITIES	8,098,378 1,604,504 1,740,467	6,291,775 1,604,504 1,740,467	1,775,154	31,449
TOTAL	\$ 11,443,349	9,636,746	\$ 1,775,154	\$ 31,449

Statement 7 - Form 990, Part III, Line a - Statement of Program Service Accomplishments

INSTRUCTIONAL GRANTS AND SCHOLARSHIPS, WHICH INCLUDED STUDENTS RECEIVING STUDENT FINANCIAL AID. THE TOTAL NUMBER OF STUDENTS RECEIVING FINANCIAL AID AMOUNTS TO 4060.

Statement 8 - Form 990, Part III, Line e - Other Program Services

AUXILIARY SERVICES, INTEREST AND OTHER EXPENSES

009118 THE UNIVERSITY OF FINDLAY

34-4431169

Federal Statements

FYE: 6/30/2005

Statement 9 - Form 990	Part IV.	Line 54 - Investments in Securities

Description	Beginning of Year	End of Year	Basis of Valuation
US AND STATE GOVERNMENT GOVERNMENT OBLIGATIONS	46,658	71,931	MARKET
CORPORATE STOCK	,	·	_
MARKETABLE EQUITY SECURITIES	9,713,318	9,313,959	MARKET
COMMON TRUST FUNDS	86,572	92,461	MARKET
MUTUAL FUNDS		8,301,268	MARKET
CORPORATE BONDS			
DEFERRED FINANCING COSTS &			
UNAMORTIZED BOND DISCOUNT	716,836	648,115	COST
REVENUE BONDS	2,435,985	2,523,124	MARKET
	12,999,369	20,950,858	

Statement 10 - Form 990, Part IV, Line 56 - Other Investments

	_	Beginning of Year		End of Year	Basis of Valuation
OTHER INVESTMENTS ALTERNATIVE INVESTMENTS	\$_	844,950	\$	622,689 4,344,367	COST COST
TOTAL	\$_	844,950	\$_	4,967,056	

Statement 11 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description				
	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
BUILDINGS				
IMPROVEMENTS	\$59,691,896	\$12,765,678	\$60,998,258	\$13,970,009
	4,859,224	2,321,733	5,476,406	2,519,356
EQUIPMENT & FURNISHINGS	13,862,037	8,842,937	14,953,709	9,930,487
CONSTRUCTION IN PROGRESS	13,802,037	0,042,937	14,933,709	9,930,467
T 3.450	52,904		630,471	
LAND	3,807,171		4,142,281	
TOTAL		\$23,930,348	\$86,201,125	\$26,419,852

Statement 12 - Form 990, Part IV, Line 58 - Other Assets

Description	Beginning of Year	End of <u>Year</u>
INTEREST RECEIVABLE & OTHER OTHER NON-DEPRECIABLE ASSETS	\$ 660,863 1,690,809	\$ 575,494 1,910,079
TOTAL	\$ 2,351,672	\$ 2,485,573

5/15/2006 3:01 PM

009118 THE UNIVERSITY OF FINDLAY

34-4431169

Federal Statements

FYE: 6/30/2005

Statement 13 - Form 990, Part IV, Line 62 - Deferred Revenue

Description	Beginning of Year	End of Year
DEFERRED TUITION	\$ 1,908,530	\$ 1,668,517
TOTAL	\$ 1,908,530	\$ <u>1,668,517</u>

Statement 14 - Form 990, Part IV, Line 65 - Other Liabilities

Description	Beginning of Year	End of <u>Year</u>
NDSL PROGRAM TUITION AND ROOM ADVANCES FUNDS HELD IN TRUST	\$ 1,560,894 1,511,420 1,821,284	\$ 1,717,069 1,649,220 1,858,271
TOTAL	\$ 4,893,598	\$ 5,224,560

009118 THE UNIVERSITY OF FINDLAY
Federal Statements

FYE: 6/30/2005

Statement 15 - Form 990, Part IV-A - Other Revenue Included on Return

Description	Amount
SCHOLARSHIPS REPORTED NET OF INCOME ON THE AUDITED FINANCIAL STATEMENTS AND ON LINE 22A OF THE RETURN.	\$ 27,542,516
$\overline{ ext{NET}}$ SPECIAL EVENT INCOME REPORTED WITHIN THE EXPENSES OF THE FINANCIAL STATEMENTS AND ON LINE 9A OF THE RETURN.	-62,492
$\overline{ ext{R}}$ ENTAL EXPENSES REPORTED WITHIN EXPENSES OF THE AUDITED FINANCIAL STATEMENTS AND ON LINE 6B OF THE RETURN.	-253,756
$\overline{\text{B}}\textsc{OOKSTORE}$ EXPENSES AND COST OF GOODS SOLD REPORTED WITHIN EXPENSES OF THE AUDITED FINANCIAL STATEMENTS AND ON LINE 10B OF THE RETURN.	-1,620,747
	588,497
	-919,592
TOTAL	\$25,274,426

Statement 16 - Form 990, Part IV-B - Other Expenses Included on Return

Description	Amount
SCHOLARSHIPS REPORTED NET OF INCOME ON THE AUDITED FINANCIAL STATEMENTS AND ON LINE 22A OF THE RETURN.	\$ 27,542,516
$\overline{ ext{N}} ext{ET}$ SPECIAL EVENT EXPENSES REPORTED WITHIN THE EXPENSES OF FINANCIAL STATEMENTS AND ON LINE 9B OF THE RETURN.	-62,492
RENTAL EXPENSES WITHIN THE EXPENSES OF THE AUDITED FINANCIAL STATEMENTS AND ON LINE 6B OF THE RETURN.	-253,756
BOOKSTORE EXPENSES AND COST OF GOODS SOLD REPORTED WITHIN EXPENSES OF THE AUDITED FINANCIAL STATEMENTS AND ON LINE	1 600 747
10B OF THE RETURN.	-1,620,747
TOTAL	\$25,605,521

118 THE UNIVERSITY OF FINDLAY	5/15/2006 3.01 PM ·	
14 31169	Federal Statements	

009118 THE UNIVERSITY OF FINDLAY 34-4431169 FYE: 6/30/2005	Federal Statements	ements			5/15/2006	5/15/2006 3.01 PM
Statement 17 - Form 990	1990, Part V - List of Officers, Directors, Trustees, and Key Employees	Directors, Truste	es, and Key E	mployees		
Name	Address	S	ļ			
City, S	City, State, Zip	Title	Average Hours Cor	Compensation	Benefits	Expenses
EMSWELLER FINDLAY OH 45840	ADIUM DRIVE VP	STUDENT S 40		93,000	20,311	0
KEED FINDLAY OH 45840	OCN MAIN SI	PRESIDENT 40		221,450	27,737	0
FINDLAY OH 45840	CONTROLLEM DR VP	ACAD AFFS 40		107,000	26,804	0
FINDLAY OH 45840	20 CAMEDOI LANE VP	BUS AFFRS 40		116,000	22,499	0
DANE ERFORD FINDLAY OH 45840	OU SILVER	R/A TREA 40		75,300	16,570	0
Λ.	00 N MAIN	STEE 1		0	0	0
JAMES BARON FINDLAY OH 45840 ODFII C BARDV	1000 N MAIN ST TRUSTEE 1000 N MAIN ST	STEE 1		0	0	0
FINDLAY OH 45840	NITHIN OC	STEE 1		0	0	0
C KICHAKU BECKEII FINDLAY OH 45840 PENNIS F BISHOR	1000 N MAIN SI TRUSTEE	STEE 1		0	0	0
1	NITHE N OO	STEE 1		0	0	0
	OO N MAIN	STEE 1		0	0	0
DON K CAKTER FINDLAY OH 45840	1000 N MAIN ST TRUSTEE	STEE 1		0	0	0
	NITULI NI OO	STEE 1		0	0	0
FINDLAY OH 45840	N T T T	STEE 1		0	0	0
י ל	NITUE NOO	STEE 1		0	0	0
ORD C COOK FINDLAY OH 45840	NIAM N OO	STEE 1		0	0	0
,	1000 N MAIN SI TRUSTEE	STEE 1		0	0	0
NAIHLEEN C CKAIES FINDLAY OH 45840	OO N MAIN	STEE 1		0	0	0

0 0 0 0 0 0 \bigcirc \circ \circ \circ 5/15/2006 3:01 PM 0 0 0 0 0 Expenses 0 $\overline{}$ \circ \bigcirc 0 0 0 0 0 0 0 0 0 \overline{C} Benefits Compensation 0 0 0 0 0 0 0 0 0 \subset 0 0 0 Statement 17 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees (continued) Average Hours Federal Statements Title TRUSTEE Address ST $S_{\mathrm{T}}^{\mathrm{S}}$ SISTS SŢ ST STSTSTSTSH $S_{\rm I}$ ST S_{T} SIMAIN MAIN z z z Z z z z Z z z Z z z z Z z 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 City, State, 45840 45840 45840 45840 FINDLAY OH 45840 FINDLAY OH 45840 45840 45840 45840 45840 45840 45840 45840 45840 45840 009118 THE UNIVERSITY OF FINDLAY HO F KECKLER FINDLAY OH FINDLAY OH FINDLAY OH $^{\rm HO}$ FINDLAY OH FINDLAY OH FINDLAY OH FINDLAY OH HO HO OH FINDLAY OH DISSINGER HOLLINGTON, FINDLAY LONGSDERFF FINDLAY FINDLAY FINDLAY PRICHARD FINDLAY Name ANN DAVIDSON CROTTEAU GARNER HAYWOOD KARL HEMINGER S KURJAN ETTER PASTOR BENJAMIN L DON MANLEY HECK MR GARY HARPST KOTARO KAKE RICHARD R RICHARD W DARRELL FYE: 6/30/2005 BRUCE LEE ΞĮ MR CRAIG A 34-4431169 工 М Þ VERNON ERIC HON. JO JOHN BETH MS MARY U

0

0

0

0

0

0

TRUSTEE

S

N MAIN

1000

45840

НО

FINDLAY

DR

DR

MR

MR

MR

MR

MR

MR

Σ

DR

MR

45840

FINDLAY OH

PASTOR WILLIAM H REIST

TRUSTEE

17

5/15/2006 3·01 PM 0 0 0 0 0 0 0 Expenses 0 \circ \circ \bigcirc 0 0 \circ 0 0 0 0 0 0 0 0 0 0 Benefits Compensation 0 0 0 0 Statement 17 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees (continued) Average Hours \vdash EMER Federal Statements Title TRUSTEE Address STST $S_{\mathbf{I}}$ STS E SŢ ST $S_{\mathbf{T}}^{\mathbf{S}}$ ST S_{\perp} SŢ ST $S_{\mathbf{T}}$ $S_{\mathbf{T}}$ ST STST MAIN MAIN MAIN MAIN 1000 N MAIN N MAIN MAIN MAIN N MAIN MAIN MAIN MAIN MAIN MAIN MAIN MAIN 1000 N MAIN z z 1000 N z 1000 N 1000 N 1000 N 1000 N 1000 N 1000 N z z z 1000 1000 1000 1000 1000 1000 1000 1000 City, State, Zip FINDLAY OH 45840 WILKIN 45840 45840 45840 45840 45840 FINDLAY OH 45840 OH 45840 45840 45840 45840 FINDLAY OH 45840 45840 45840 FINDLAY OH 45840 45840 45840 009118 THE UNIVERSITY OF FINDLAY НО НО HO CHARLES J YOUNGER НО FINDLAY OH FINDLAY OH FINDLAY OH FINDLAY OH FINDLAY OH FINDLAY OH FINDLAY OH RICHARD P BARCHENT, JR PASTOR EDWARD ROSENBERRY FINDLAY FINDLAY FINDLAY FINDLAY FINDLAY E CROSBY SMITH DVM D RICHARD STEPHENS Name THOMAS WEISSLING GEORGE M WHITSON BRIAN WASHINGTON B DONNELL E WHITE JAMES W WALPOLE MR LOUIS RUSCILLI RUSE BRIAN L YOUNG MR DAVID YATES JENNIFER C RICHARD E DR WILLIAM E FYE: 6/30/2005 RICHARD 34-4431169 THOMAS ROBERT MR DR MR MR DRMR DR MRMRDR

009118 THE UNIVERSITY OF FINDLAY 34-4431169 FYE: 6/30/2005	ts		5/15/200	5/15/2006 3:01 PM
Statement 17 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees (continued)	Directors, Trustees	s, and Key		
Name				
City, State, Zip Title	Average Hours	Compensation	Benefits	Expenses
DR RAY EVANS FINDLAY OH 45840 TRUSTEE		0	0	0
1000 N MAIN ST 45840	, ,	0	0	0
1000 N MAIN ST	۲	Ć	((
FINDLAY OH 45840 MR G NORMAN NICHOLSON 1000 N MAIN ST	ℸ	0	O	0
FINDLAY OH 45840 TRUSTEE MR J DUANE PHILIPP	\vdash	0	0	0
FINDLAY OH 45840	ᠵ᠆ᠯ	0	0	0
MR JOHNNIE D JOHNSON FINDLAY OH 45840 TRUSTEE	Н	0	0	0
DR RICHARD VANHORN FINDLAY OH 45840 TRUSTEE	П	0	0	0
MR WILLIAM W YODER 1600 N MAIN ST FINDLAY OH 45840	, -	C	C	C
1000 N MAIN ST	1))
FINDLAY OH 45840 TR/FACUL	REP 1	0	0	0

009118 THE UNIVERSITY OF FINDLAY 5/15/2006 3:01 PM

34-4431169

Federal Statements

FYE: 6/30/2005

Statement 18 - Form 990, Part VI, Line 89b - Description of Excess Benefit Transaction

IN AUGUST 2004, THE UNIVERSITY FIRST BECAME AWARE OF THE PAYMENT OF IMPROPER BENEFITS TO CERTAIN PEOPLE. THESE BENEFITS WERE SMALL IN AMOUNT, AND ONCE DISCOVERED, THE UNIVERSITY IMMEDIATELY DISCONTINUED PAYING THEM.

009118 THE UNIVERSITY OF FINDLAY
34-4431169 Federal Statements

FYE: 6/30/2005

Statement 19 - Form 990, Part VIII - Relationship of Activities

Line No.	Description
93A	REVENUE RECEIVED FROM STUDENTS FOR TUITION AND FEES TO ATTEND THE UNIVERSITY OF FINDLAY.
93B	AUXILIARY SERVICES THAT FURTHER THE EXEMPT PURPOSE OF
93C	EDUCATION BY PROVIDING RESIDENCE, DINING HALL AND OTHER FACILITIES.
93D	REVENUE DERIVED FROM INTERCOLLEGIATE ATHLETIC PARTICIPATION.
93E	REVENUE DERIVED FROM THE EQUESTRIAN EDUCATION PROGRAM.
102	REVENUE DERIVED FROM THE SALE OF INSTRUCTIONAL AND EDUCATIONAL MATERIALS AND GOODS AS WELL AS OTHER MISCELLANEOUS ITEMS TO STUDENTS AND STAFF IN FURTHERANCE OF THE UNIVERSITY'S EXEMPT PURPOSE
103A	REVENUE RECEIVED FROM STUDENTS AND STAFF FOR PROVIDING ALLIED EDUCATIONAL MATERIALS AND SERVICES

•		
5/15/2006 3:01 PM	Income EOY As	47,400
Federal Statements	Statement 20 - Form 990, Part IX - Information Regarding Taxable Subsidiaries s Name Ownership % 1319 N. MAIN STREET 100.0000 RENTAL	
009118 THE UNIVERSITY OF FINDLAY 34-4431169 FYE: 6/30/2005	Statement 20 - Form 99 Bus Name EIN Ownership % MILLSIX COMPANY 34-1081146 100.0000 RENTAL	TOTAL

009118 THE UNIVERSITY OF FINDLAY 34-4431169 Federal Statements

FYE: 6/30/2005

Statement 21 - Schedule A, Part III, Line 2b - Lending of Money or Extension of Credit

BRUCE LEE-FIFTH THIRD BANK-LOAN THOMAS WEISSLING-SKY BANK-LOAN

ANY AND ALL OF THE ABOVE SUCH TRANSACTIONS OCCURRED IN THE NORMAL COURSE OF BUSINESS AND WERE CONDUCTED AT ARM'S LENGTH.

Statement 22 - Schedule A, Part III, Line 2c - Furnishing Goods, Services, or Facilities

JOHN BURSON, SHUMAKER, LOOP & KENDRICK - \$526 LEGAL
LYNN CHILD, AARDVARK MEDIA PRODUCTIONS - \$13,316 COMPUTER SUPPORT
BETH HECK, KENNEDY PRINTING - \$181,742 PRINTING
LOUIS RUSCILLI, RUSCILLI CONSTRUCTION - \$7,523 CONSTRUCTION
DR. WILLIAM RUSE, DRAKE, PHILLIPS, KUENZLI & CLARK- \$3,280 LEGAL
W B REALTY, LTD. - \$156,000 RENT

ANY AND ALL OF THE ABOVE SUCH TRANSACTIONS OCCURRED IN THE NORMAL COURSE OF BUSINESS AND WERE CONDUCTED AT ARM'S LENGTH.

Statement 23 - Schedule A, Part III, Line 2d - Payment of Compensation / Reimbursement of Exp

SEE FORM 990, PART V.

Statement 24 - Schedule A, Part III, Line 3a - Explanation of Grant / Loan Qualifications

SCHOLARSHIPS GIVEN BY THE UNIVERSITY OF FINDLAY ARE GRANTED ONLY TO STUDENTS OF THE UNIVERSITY OF FINDLAY, BASED ON DETERMINATIONS OF NEED AND MERITED ACADEMIC SCHOLARSHIP AS DETERMINED BY THE FINANCIAL AID OFFICE AT THE UNIVERSITY.

5/15/2006 3:01 PM

009118 THE UNIVERSITY OF FINDLAY 34-4431169 Federal Statements

FYE: 6/30/2005

Special Events Direct Expenses

Description	Amount
COLUMN A GOLF OUTING	\$
GOLF OUTING DIRECT EXPENSES	62,492
SUBTOTAL	62,492
TOTAL	62,492

DIRECT EXPENSES OTHER THAN FUNDRAISING EXPENSES REPORTED ON FORM 990, PAGE 1, LINE 9B.