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DLN: 93493116000100

Form **990**

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)

OMB No 1545-0047

Department of the Treasury

Internal f	Revenue	Service	► The or	ganization may have to use a copy	of this return to satisfy s	state reporting	requirements	Inspection
A Fo	rthe 2	2008 ca	lendar yea	r, or tax year beginning 07-01-2008	and ending 06-30-200)9		
		plicable	Please	C Name of organization Brenau University Inc				entification number
_	ress cha	_	use IRS label or	Doing Business As			58-056614 E Telephone nu	
	ne chan	_	print or type. See				-	
Initi	al retur	'n	Specific Instruc-	Number and street (or P O box if mail	is not delivered to street addre	ess) Room/suite	(770) 534-0 G Gross receipt	
Ten	mınatıoı	n	tions.	500 Washington Street SE				+,,
☐ Ame	ended r	eturn		City or town, state or country, and ZIP Gainesville, GA 305013628	+ 4	•	1	
M App	lication	pending						
		Ī		ne and address of Principal Officer		H(a) Is the	s a group return	
				ard L Schrader J ashington Street SE		affilia	tes?	ΓYes Γ Nο
				ville, GA 305013628	_	H(b) Are al	l affiliates include	ed?
I Tax	k-exem	pt status	✓ 501(c)) (3) ◀ (insert no)	527	-	•	See instructions)
J W	eb site	e: 🕨 www	v brenau ed	du		H(c) Grou	p Exemption Nu	mber ►
K Type	e of org	anızatıon	Corporat	cion trust association other		L Year of Fo	rmation 1878 M	State of legal domicile GA
Pai	rt I	Sumr	nary					_
				e organization's mission or most si	gnificant activities			
<u>ခ</u> ွ			•	prepares students to live extraord	•			
Governance				experience leads to intellectual an mitment to service, and increases				for artistic expression,
Well	2	Check t	hıs box 🦵	ıf the organizatıon discontinued its	operations or disposed o	of more than 2	5% of its assets	S
ŝ	3	Number	of voting r	members of the governing body (Pa	rt VI, line 1a)		3 _	34
×ර ග	4	Number	ofindepen	ndent voting members of the govern	iing body (Part VI, line 1	b)	. 4 _	30
E E				nployees (Part V, line 2a)		5 _	946	
Activities &				olunteers (estimate if necessary)		_	57	
₫		_		ted business revenue from Part VI			7a _ 7b	0
	В	net unit	erated busi	ness taxable income from Form 99	0-1, lifte 34	Drie	or Year	Current Year
	8	Contrib	nutions and	d grants (Part VIII, line 1h)			3,531,167	1,769,085
ē	9			revenue (Part VIII, line 2g)		35,791,491	37,224,960	
Revenue	10			me (Part VIII, column (A), lines 3,			7,881,946	6,011,361
芒	11	Other	revenue (P	art VIII, column (A), lines 5, 6d, 8	c, 9c, 10c, and 11e)			5,164
	12		evenue—a	dd lines 8 through 11 (must equal f	Part VIII, column (A), lın	ne	47,204,604	45,010,570
	13	12) Grants	and simila	ar amounts paid (Part IX, column (A	1) lines 1 = 3)		8,159,171	8,258,487
	14			or for members (Part IX, column (A)			0,133,171	0,230,407
	15		•	ompensation, employee benefits (Pa	'	5-	-	
Expenses		10)					19,647,399	20,017,449
<u>a</u>	16a			raising fees (Part IX, column (A), l	·		152,438	21,001
五	ь	•		penses, Part IX, column (D), line 25 588,33				
	17			(Part IX, column (A), lines 11a-11			12,290,590	11,876,036
	18 19			-add lines 13–17 (must equal Part penses Subtract line 18 from line 1			6,955,006	40,172,973
* o	19	Revent	ae iess ext	Jenses Subtract fine 10 from fine 1	. 2	Reginni	ing of Year	End of Year
Net Assets or Fund Balances	20	Totala	ssets (Par	rt X, line 16)		2.59	81,860,641	73,636,611
Ass. Ba	21		•	Part X, line 26)			20,745,597	22,018,436
det.	22		•	id balances Subtract line 21 from l		61,115,044	51,618,175	
	22 1333		ature Blo		20		31,113,077	31,010,173
		Under pe	enalties of pe	erjury, I declare that I have examined this				
D!		اد		correct, and complete Declaration of prepa	nrer (other than officer) is base	1		er has any knowledge
Plea Sign		**** Signa	** hture of office	2r	-04-26			
Here					Date			
			or print nam	VP for Financial Services ne and title				
		Preparer'	s k .			Check If	Preparer's PTIN ((See Gen Inst)
Paid		signature		ne Williams Jr		self- empolyed 🕨 🦵		·
Prepa	arer's		me (or your	s Metcalf Davis CPAs	1	• • •	Fra. b	
	Only	ıf self-em	nployed), and ZIP + 4	3340 Peachtree Road NE Suite 2600			EIN 🕨	

3340 Peachtree Road NE Suite 2600

Atlanta, GA 303261089 May the IRS discuss this return with the preparer shown above? (See instructions) . Phone no 🕨 (404) 264-1700

Part III Statement of Program Service Accomplishments (See the instructions.)

1	Briefly describe the organization's mission				
	Brenau University prepares students to live ext intellectual and professional accomplishment, in personal integrity				
2	Did the organization undertake any si the prior Form 990 or 990-EZ? .	gnıfıcant program sei	rvices during the year v	which were not listed on	┌ Yes ┌ No
	If "Yes," describe these new services	on Schedule O			
3	Did the organization cease conducting services?	g or make sıgnıfıcant	changes in how it cond	ucts any program	┌ Yes ┌ No
	If "Yes," describe these changes on S	chedule O			
4	Describe the exempt purpose achieve Section 501(c)(3) and (4) organization others, the total expenses, and reven	ons and 4947(a)(1) to	rusts are required to re	port the amount of grants	
4a	(Code) (Expenses \$	19,200,365	ıncludıng grants of \$	8,258,487) (Revenue \$)
	Brenau University is a private comprehensive divisions offer diverse educational opportunit encourage community responsibility and glol foundation. Enrollment for the Women's colk College offers baccalaureate, master's and e 1,705 The Academy, a residential preparator is 50.	ties founded in the Liberal bal understanding The Wo ege is 879 with ninety per ducation specialist degree	Arts that lead to intellectual men's College offers more t cent of its students receiving is to both men and women	and professional development han 37 baccalaureate and grad i some type of financial aid The The enrollment in the Evening	foster personal growth, and uate programs with a liberal arts Evening and Weekend and Online and Weekend and Online College is
4b	(Code) (Expenses \$ The Evening and Weekend and Online College is	ge offers baccalaureate, n	ıncludıng grants of \$ naster's and education specia) (Revenue \$ alist degrees to both men and v) vomen The enrollment in the
4c	(Code) (Expenses \$ The Academy, a residential preparatory scho		including grants of \$) (Revenue \$ en in grades nine through twek) ve The Academy enrollment is 50
4d	Other program services (Describe i	•		\	
_	(Expenses \$	including grants of	<u> </u>) (Revenue \$)
4e	Total program service expenses \$	32,244,548	B Must equal Part IX, L	ine 25, column (B).	

art IV	Checklist	of Required	l Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		N o
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νο
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Νο
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		Νο
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		N o
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15		N o
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If</i> "Yes," complete Schedule F, Part III	16		N o
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
ь	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part VI

Part IV Checklist of Required Schedules (Continued)

			163	140
8	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Νο
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		Νο
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Νο
5	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νο
6	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νo
7	Did the organization conduct more than 5 percent of its activities through an entity that is not a related	37		No

Enter the number reported in Box 3 of Farm 1095, Annual Summary and Transmitted 1	Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance	e				
so of U.S. Information Returns. Enter-0- if not applicable a lab 100 de the organization comply with backing withholding rules for reportable payments to vendors and reportable gamino (gambing) within 90 per evinines? 2. Enter the number of employees reported on Form W-3, framemital of Wage and Tax Statements like for the calendary area ending with more within the year evered by this return. 3. Externest like of the calendary area ending with more within the year evered by the return. 3. If all seas one is reported in 2a, did the organization file all required federal employment tax returns? 3. Note of the calendary area ending with or within the year covered by this return. 3. Did the organization have unstated business gross income of 31,000 in more duming the year covered by this return. 3. Did the organization have a network of the file the return. 3. Did the organization have a network of the file the return. 4. A tary time during the calendary year, did the organization have an interest in or a signature or other authority of accounts of the foreign country. 5. Was the organization of exceptions and filling featurements for Form TD F 99-221, Report of Porwan Bank and Jack in the programation have an interest in or a signature or other authority of the interest of the organization has been known, exception at any time during the tax year? 5. Was the organization appropriate tax sheller transaction at any time during the tax year? 5. Was the organization appropriate of the organization has a part to a prohibited tax sheller transaction at any time during the tax year? 5. Was the organization appropriate of the organization at any time during the tax year? 5. Was the organization provide goods or services in exchange for any sould provide any entire that such contributions or girls when were not tax deductable? 5. Organization that hay reverse deductable contributions with were not tax deductable? 6. Organization approved goods or services in exchange for any sould provide the contribution of						Yes	No
b Enter the number of Forms W-26 included in line 1a Enter-0-intot applicable c Dut the organization comply with backup withhelding rules for reportable payments to evenders and reportable gaming (gambling) winnings to prize winners? 2 Enter the number of employees reported on form W-3, Transmitter of Wage and Tax Steaments flied for the calendar year ending with or within the year covered by this return. 946 b If a least one is reported in 2a, did the organization file all required feed elementory to the return. 946 b If a least one is reported in 2a, did the organization file all required feed elementory and the service of the service return. 947 b If the sign of the service of the service of the service return. 948 b If the least one is reported in 2a, did the organization file all required feed elementory from the service. 940 b If the sign of the service of the service of the service return. 941 b If the service of the service of the service of the service return. 942 b If the service of th	1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal					
b Enter the number of Forms W-20 included in line 1a Enter-0- find applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamming (applicable) with the programming of the pro		of U.S. Information Returns. Enter -0- if not applicable					
c Did the organization comply with backup withholding rules for reportable payments to venders and reportable gamming (gambling) within packup withholding rules for reportable payments to venders and reportable gamming (gambling) within packup within pac			1a	104			
sparming (gambling) winnings to prize winners? 2 States the number of employees reported on Form W-3, Transmitted of Wage and Tax Statements filed for the calendar year anding with or within the year covered by this return. 3 If a least one is epointed in Za, did the origanization file all required federal employment late returns? 4 If a least one is epointed in Za, did the origanization file all required federal employment late returns? 5 If Yea, The interior of the State of Stat	b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
20	С		to ven	dors and reportable	_		
Statements field for the calendar year ending with or within the year covered by this return. It at least one is reported in 2a, did the organization file all required federal employment tax returns? Note: If the sour of hise 2 and 2 as greater than 250, you may be required to enheling the this return. Note: If the sour of hise 2 and 2 as greater than 250, you may be required to enheling the time than 250. It is sourced that the source of the source of \$1,000 or more during the year covered by this return? At any time during the calendar year, did the organization have an interest in rar a signature or other authority over, a financial account; in a foreign country (such as a bank account, securities account, or other financial accounts? If 'Yea,' anter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. So Was the organization a party to a prohibited tax shelter transaction? By Was the organization aparty to a prohibited tax shelter transaction? C If 'Yes,' to Sa or 50, did the organization that it was or is a party to a prohibited tax shelter transaction? By Uff the organization solicit any contributions that were not tax deductible? C If 'Yes,' to Sa or 50, did the organization include with very solicitation and express statement that such contributions organized were not tax deductible? C Organizations that may receive deductible contributions under section 170(c). Did the organization of summary that do not of the value of the goods or services provided? Did the organization of summary that do not of the value of the goods or services provided? To good if the organization of the contange, or otherwise dispose of tangible personal property for which it was required to the form 8282? If If 'Yes,' indicate the number of Forms 8282 filed during the year. Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract? To Did the organizatio	_		· ·		1c	Yes	
b Ist least tons is reported in 2a, did the organization itsell required federal employment tax returns? Note: If the sum of iness Je and 2a is greater than 250, you may be required to e-file this return. Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this eticlin. If the sum of iness Je and 2a is greater than 250, you may be required to e-file this return. Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this eticlin. If the sum of the form 990-T for this year? If No, provide an explanation in Schedule 0. 3b 17 Yes, has it filed a form 990-T for this year? If No, provide an explanation in Schedule 0. 3c 17 Yes, and the called a form 990-T for this year? If No, provide an explanation in Schedule 0. 3c 17 Yes, and the the name of the foreign country see the instructions for exceptions and filing requirements for Form TDF 90-221, Report of Foreign Bank and financial Accounts. 3c 18 Yes see the instructions for exceptions and filing requirements for Form TDF 90-221, Report of Foreign Bank and financial Accounts. 3c 17 Yes, and the organization of the form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited financial Accounts. 3c 17 Yes, and the organization of the form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited financial Accounts. 3c 18 Yes 18 Yes 19 Yes 19 Yes 19 Yes 19 Yes 19 Yes, did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible? 3c 17 Yes, did the organization notify the donor of the value of the goods or services provided? 3c 17 Yes, did the organization notify the donor of the value of the goods or services provided? 3d 17 Yes, did the organization notify the donor of the value of the goods or services provided? 4d 17 Yes, did the organization of qualities the number of Forms 8282 filed during the year. 4d 19 Yes, did the organization of qua	2a	Statements filed for the calendar year ending with or within the year covered by this	2a	946			
Note: If the sum of lines I a and 2 as a greater than 250, you may be required to effect this return. 30 Dut the organization have unrelated business goes income of \$1,000 or more during the year covered by this return? 31 If "Yes," has if field a Form 900-T for this year? If "No." provide an explanation in Schedule 0. 32 United a form 900-T for this year? If "No." provide an explanation in Schedule 0. 33 United and the second of the second o	h						
b If Yes, has it filed a Form 990. T for this year? If Wa "provide an explanation in Schedule O. 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over a financial account; in a foreign country (such as a bank account, as cunties account, or other financial accountry). b If Yes, "enter the name of the foreign country (such as a bank account, securities account, or other financial accountry). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a No. b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If Yes," to Sa or 5b, did the organization file Form 8886-1, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5b If Yes," did the organization in clude with every solicitation an express statement that such contributions or gift were not tax deductible? b If Yes," did the organization include with every solicitation an express statement that such contributions or gift were not tax deductible? b If Yes," did the organization include with every solicitation an express statement that such contributions or gift were not tax deductible? b If Yes," did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? b If Yes," did the organization notify the donor of the value of the goods or services provided? 7c Ves 7b Ves 7c No 6b Und the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c No 6 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7c No 6 Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 Did the organization of qualified intellectual property, did the organization file a Form 1098-C as required? 9 Section 501(c)(3) and other sponso					2b	Yes	
4a A lary time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country with the country of the instructions for exceptions and filing requirements for Form 1D F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c If "Yes," to 5s or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6c If the organization solicit any contributions that were not tax deductible? 6c Did the organization solicit any contributions that were not tax deductible? 6c Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? 6c Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? 6c Did the organization of \$22.7 the down of the value of the goods or services provided? 6d Did the organization at \$1, exchange, or otherwise dispose of tangible personal property for which it was required to his Form \$22.7 the forms \$2.28 filed during the year. 7d Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d Did the organization, during the year, pay premiums, directly or indirectly, to a personal benefit contract? 7f Did the organization of qualified intellectual property, did the organization file a Form \$2.99 as required? 7f Did the organization of qualified intellectual property, did the organization file a Form \$2.90 as required? 7g An No Portion of the supporting organizations and account funds and account funds 8 Section \$501(c)(3) and other sponsoring organizations mantaining donor advised funds. 9 Section \$50	3a		ng the	year covered by this	3a		No
over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Innancial Accounts. 58 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 59 No 16 If "Yes," to 5 a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 60 Did the organization solicit any contributions that were not tax deductible? 61 Accounts of the did the organization of the time that such contributions or gifts were not tax deductible? 62 Organizations should any contributions under section 170(c). 63 Did the organization operated so or services in exchange for any guid for a quo contribution of \$75 or more? 70 Organizations that may receive deductible contributions under section 170(c). 71 Did the organization provide goods or services in exchange for any guid for a quo contribution of \$75 or more? 72 If "Yes," did the organization notify the donor of the value of the goods or services provided? 73 Yes 74 If "Yes," did the organization notify the donor of the value of the goods or services provided? 75 If "Yes," indicate the number of Forms \$282 filed during the year 76 If If the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 76 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 77 In No 78 For all contributions of qualified intellectual property, did the organization file a Form 1098-C as required? 79 No 19 For all contributions of qualified intellectual property, did the organization file a Form 1098-C as required? 79 No 10 Section \$51(c)(2) and other sponsoring organizations maintaining donor advised funds. 110 Did the organization make a distribution to a donor, donor advised funds. 11	ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Sch	nedule	0	3b		
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b No c 1f Yea, "10 Sa or 59, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6b Did the organization solicit any contributions that were not tax deductible? 6c Did the organization solicit any contributions that were not tax deductible? 6d Dif Yea, "did the organization include whe very solicitation an express statement that such contributions or gifts were not tax deductible? 6d Dif Yea, "did the organization to not who were year contributions under section 170(c). 7a Uses 7b If Yea, "did the organization notify the donor of the value of the goods or services provided? 7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82.82? 6d If "Yea," indicate the number of Forms 82.82 filed during the year 6 Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 No 9 For all contributions of qualified intellectual property, did the organization file Form 88.99 as required? 7 No 9 For all contributions of organization file form 88.99 as required? 7 No 9 For all contributions of organization file form 88.99 as required? 9 Section 501(c/3) and other sponecoring organization, or a fund maintained by a sponsoring organization, have seen as a distribution of the supporting organization, or a fund maintained by a sponsoring organization, have seen despited and the supporting organization maintaining door ad	4a	over, a financial account in a foreign country (such as a bank account, securities ac	_	,	4a		No
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b If "Yes," did the organization notify the donor of the value of the goods or services provided?		Did the organization provide goods or services in exchange for any quid pro quo cor	ntrıbut	ion of \$75 or	7a	Yes	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	b		rovide	vd?	7b	Yes	
file Form 8282?					7.5	103	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			· •		7c		Νο
benefit contract?	d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	e			niums on a personal	7e		Νο
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	f			enefit contract?	7f		Νο
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8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations Enter a Gross income from members or shareholders 11 Section 501(c)(12) organizations Enter a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the	h		file a F	orm 1098-C as			
supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	_	·			7h		N o
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Did the organization make any taxable distributions under section 4966?	9	·					
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a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations Enter a Gross income from members or shareholders	b				9b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations Enter a Gross income from members or shareholders	10	Section 501(c)(7) organizations. Enter					
facilities 11 Section 501(c)(12) organizations Enter a Gross income from members or shareholders	а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
a Gross income from members or shareholders	b		10b				
a Gross income from members or shareholders	11	Section 501(c)(12) organizations Enter					
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			11a				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the	b	· · · · · · · · · · · · · · · · · · ·					
126	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 i	n lieu (of Form 1041?	12a		
,	b	•	12b				

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management	

			165	140			
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.						
1a	Enter the number of voting members of the governing body 1a 34						
Ь	Enter the number of voting members that are independent 1b 30						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο			
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?						
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο			
6	Does the organization have members or stockholders?	6		Νo			
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο			
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а	the governing body?	8a	Yes				
ь	each committee with authority to act on behalf of the governing body?	8b	Yes				
9a	Does the organization have local chapters, branches, or affiliates?	9a		Νο			
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b					
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Yes				
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		Νο			

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed GA
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply

own website another's website upon request

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

Sandra Thornton 500 Washington Street SE Gainesville, GA 305013628

(770) 534-6268

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

Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- * List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- * List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- * List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

The check this box in the organization and i		Posit	(C) chec	:k al			(E)	(F)
(A) Name and Title	(B) Average hours per week	erage Total Mark Total Compensation Compe	Reportable compensation from the organization (W-	Reportable compensation from related organizations (W- 2/1099-	Estimated amount of other compensation from the organization and related organizations				
						-			

Part VII Continued

		(C) Position (check all that apply)							(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
			-							
				\vdash			1			
							\vdash			
1b Total							 	1,223,451		154,850

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►7

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> "Yes," complete Schedule J for such individual	3		Νο
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
Aramark Services Inc 1101 Market Street Philadelphia, PA 191072988	Food service vendor	1,577,201
Carroll Daniel Construction Co PO Box 1438 Gainesville, GA 30503	Construction contractors	715,377
Aramark Facility Services 1101 Market Street Philadelphia, PA 191072988	Custodial services	478,471
Catalyst Communications 8358 Main Street 1st Floor Ellicott City, MD 21043	Advertising	365,478
Royall & Company 1920 East Parham Rd Richmond, VA 23228	Student search	322,639
2 Total number of independent contractors (including those in 1) we from the organization	, ,	7

d All other revenue ____

8c, 9c,10c,and 11e

Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d,

Form 9	90 (2	008)					Page 9
Par		Statement of Revenue					-
VII	I						
				(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
	1a	Federated campaigns 1a					,
nts nts	ь	Membership dues					
; gra imou	c	Fundraising events	16,000				
£ ä	d	1c Related organizations1d					
S,E	e	Government grants (contributions) 1e	118,668				
î L	f	All other contributions, gifts, grants, and	1,634,417				!
ē ₹		sımılar amounts not ıncluded above					
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in lines 1a-1f \$160,853					
-	h	Total (Add lines 1a-1f)	· · · .	1,769,085			
		Bus	iness Code				
ПE	2a	Tuition and fees	611,710	31,708,226	31,708,226		
e Ke	ь	Auxiliary services	611,710	5,516,734	5,516,734		
ā E	c						
7 4 5	d						
33	e						
Program Serwce Revenue	f	All other program service revenue					
Ş							
Δ.	g	Total. Add lines 2a-2f					
	3	Investment income (including dividend	s, ınterest				
		other similar amounts)		904,707			904,707
	4	Income from investment of tax-exempt bond pi					
			· •				
	5	Royalties					
	6-	(1) Real (11) Gross Rents) Personal				
	6a b	Less rental					
	"	expenses					
	C	Rental income or (loss)					
	d	Net rental income or (loss)					
		(ı) Securities (ii) O ther				
	7a	Gross amount 12,925,290 from sales of					
		assets other					
	ь	than inventory Less cost or 7,818,636					
		other basis and sales expenses					
	С	Gain or (loss) 5,106,654					
	d	Net gain or (loss)		5,106,654	5,106,654		
	8a	Gross income from fundraising events (not including	-				
Other Revenue		\$35,236 of contributions reported on line 1c) See Part IV, line 18					
ě		Attach Schedule G if total exceeds					
Œ		\$15,000 a	16,000				
ih e	Ь	Less direct expensesb	30,072				
ō	С	Net income or (loss) from fundraising e	vents	5,164	5,164		
	9a	Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000					
		a					
	ь	Less direct expensesb					
	С	Net income or (loss) from gaming activ	ities F				
	10a	Gross sales of inventory, less returns and allowances .					
		a					
	Ь	Less cost of goods sold b					
	С	Net income or (loss) from sales of inver Miscellaneous Revenue Bus					
	11a		iness Code				
	Ь						
	6						
	1 0	I	I	I		1	i

45,010,570

42,336,778

904,707

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgalizations must complete column (A) but are not r		plete columns).
Do r	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	8,258,487	8,258,487		
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,550,500	623,043	741,210	186,247
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	14,584,100	12,516,663		301,906
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	660,032	613,632	46,400	
9	Other employee benefits	2,044,739	1,900,994	143,745	
10	Payroll taxes	1,178,078	1,095,259	82,819	
11	Fees for services (non-employees)				
а	Management				
b	Legal	24,724		24,724	
С	Accounting	113,191		113,191	
d	Lobbying				
е	Professional fundraising See Part IV, line 17	21,001			21,001
f	Investment management fees				
g	Other	688,387	593,711	94,676	
12	Advertising and promotion	501,678	40,001	461,677	
13	Office expenses	1,829,442	1,284,763	522,769	21,910
14	Information technology	167,200	133,919	33,281	
15	Royalties				
16	Occupancy	1,352,882	1,282,443	70,439	
17	Travel	405,047	254,138	116,659	34,250
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings				
20	Interest	505,297	465,783	39,514	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,703,989	1,585,903	118,086	
23	Insurance	258,798	2,374	256,424	
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	Operations	2,037,574	141,991	1,877,518	18,065
b	Recruiting	362,171	17,834	344,337	
c	Net assets released	305,835	102,461	203,374	
d	Camps and special progr	303,359	303,359		
e	Food	202,987	202,987		
f	All other expenses	1,113,475	824,803	283,717	4,955
25	Total functional expenses. Add lines 1 through 24f	40,172,973	32,244,548	7,340,091	588,334
26	Joint Costs. Check I if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				200 (2008)

Part X	Balance	Sheet

						(A) Beginning of year		(B End of	
	1	Cash—non-interest-bearing				Degining of year	1	Liid O	year
	2	Savings and temporary cash investments				499,201	2		894,758
	3	Pledges and grants receivable, net		3,602,965			2,539,312		
	4	Accounts receivable, net				2,001,449	4		2,935,870
	5	Receivables from current and former officers, directors, trustees		emnlove	es or				
		other related parties $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	•	•			5		
	6	Receivables from other disqualified persons (as defined under s persons described in section $4958(c)(3)(B)$ Complete Part II of					6		
	7	Notes and loans receivable, net	•		•		7		
	8	Inventories for sale or use					8		
ş	9	Prepaid expenses and deferred charges					9		
Assets	10a	Land, buildings, and equipment cost basis	10a		61,152,709				
_	ь	Less accumulated depreciation Complete Part VI of						_	
		Schedule D	10b		24,755,747	· · · · · · · · · · · · · · · · · · ·			6,396,962
	11	Investments—publicly traded securities				30,950,509	11		2,485,986
	12	Investments—other securities See Part IV, line 11 $\it Complete Passing Schedule D$	art VII	of		5,159,608	12		3,716,853
	13	Investments—program-related See Part IV, line 11 $\it Complete F \it of Schedule D$.			13				
	14	Intangible assets					14		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D				4,377,411	15		4,666,870
	16	Total assets. Add lines 1 through 15 (must equal line 34)				81,860,641	16	7	3,636,611
	17	Accounts payable and accrued expenses .				2,105,364	17		2,227,569
	18	Grants payable			18				
	19	Deferred revenue		1,417,826	19		2,202,828		
	20	Tax-exempt bond liabilities			20				
es S	21	Escrow account liability Complete Part IV of Schedule D					21		
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified							
<u></u>		persons Complete Part II of Schedule L			22				
	23	Secured mortgages and notes payable to unrelated third parties				13,111,852	23	1	3,745,339
	24	Unsecured notes and loans payable		, ,	24				
	25	Other liabilities Complete Part X of Schedule D				4,110,555	25		3,842,700
	26	Total liabilities. Add lines 17 through 25				20,745,597	26	2	2,018,436
		Organizations that follow SFAS 117, check here ▶ 🔽 and comp	lete li	nes 27					
		through 29, and lines 33 and 34.							
Balance	27	Unrestricted net assets				29,478,711	27	1	6,685,737
8	28	Temporarily restricted net assets				4,668,376	28		8,727,248
됟	29	Permanently restricted net assets				26,967,957	29	2	6,205,190
r Fund		Organizations that do not follow SFAS 117, check here ► and lines 30 through 34.	d com	plete					
s or	30	Capital stock or trust principal, or current funds					30		
ě	31	Paid-in or capital surplus, or land, building or equipment fund					31		
Assets	32	Retained earnings, endowment, accumulated income, or other fu					32		
Net	33	Total net assets or fund balances				61,115,044	33	5	1,618,175
<u> </u>	34	Total liabilities and net assets/fund balances				81,860,641	34	7	3,636,611
	L V.T.	Financial Chalamanta and Base Co.							
Рa	rt XI	Financial Statements and Reporting							
								Yes	No

Dart YT	Financial	Statements	and Reporting

1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

		e organizati	on					Em	ployer ide	nt if icat io	n number	•	
Brena	u Univei	rsity inc						5.8	-056614	3			
Pa	rt I	Reason	for Public C	harity Status (to be co	mpleted	bv all or	ganizatio						
				ation because it is (Please						,			
1	Γ			nurches, or association of ch					(A)(i).				
2	굣	A school d	escribed in Sec i	tion 170(b)(1)(A)(ii). (Attac	ch Schedu	ıle E)							
3	Γ	A hospital	A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H)										
4		A medical	research organi	zation operated in conjuncti	on with a l	hospital d	escribed i	n Section	170(b)(1)	(A)(iii). E	nter the		
		hospital's name, city, and state											
5	Γ	An organiz	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in										
		Section 17	D(b)(1)(A)(iv).	(Complete Part II)									
6	Γ	A federal, s	state, or local g	overnment or governmental	unıt descr	ribed in Se	ction 170	(b)(1)(A)	(v).				
7	Γ	An organiz	ation that norm	ally receives a substantial p	art of its s	support fro	om a gove	rnmental u	ınıt or fror	n the gene	ral public	c	
		describedi	n Section 170(I	o)(1)(A)(vi) (Complete Par	tII)								
8	Γ	A commun	ity trust describ	oed in Section 170(b)(1)(A)	(vi) (Com	nplete Par	tII)						
9	Γ	An organiz	ation that norm	ally receives (1) more than	331/3% 0	fits supp	ort from c	ontributior	ns, membe	rship fees	, and gro	SS	
		receipts fro	om activities re	lated to its exempt functions	s—subject	to certair	n exceptio	ns, and (2) no more	than 331/	'3% of		
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses											
		acquired by the organization after June 30, 1975 See Section 509(a)(2). (Complete Part III)											
10	Γ	An organiz	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See Se	ct ion 509	(a)(4). (S	ee instruc	tions)		
11	Γ	An organiz	atıon organızed	and operated exclusively fo	r the bene	fit of, to p	erform the	functions	of, or to o	arry out t	he purpo:	ses of	
		one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See Section 509(a)(3). Check											
		the box that describes the type of supporting organization and complete lines 11e through 11h a											
e	Г		• •	rtify that the organization is									
_	'	•	-	agers and other than one or			•			•	•		
		section 50		-	·		-					,	
f				d a written determination fro	m the IRS	5 that it is	a Type I,	Type II o	r Type III	supportir	ng organiz	zation,	
g		check this		as the organization accepted	d any dift	or contrib	ution from	any of the	<u>.</u>			ļ	
9		following pe		as the organization accepto	a a, g	0. 00	40.011.11.011.	u., o	•				
		(i) a perso	n who directly o	r indirectly controls, either a	alone or to	ogether wi	th persons	s describe	d ın (ıı)		Yes	No	
		and (III) be	low, the govern	ng body of the the supported	d organıza	tion?				11g	(i)		
		(ii) a family	/ member of a p	erson described in (i) above	?					11g(ii)	<u> </u>	
		(iii) a 35%	controlled ent	ty of a person described in ((ı) or (ıı) al	bove?				11g(iii)	<u> </u>	
h		Provide the	following infor	mation about the organizatio	ns the org	ganızatıon	supports						
				T	ı		T		ı		T		
		ime of	(ii) EIN	(iii) Type of organization	I	sthe		ou notify		sthe		nount of	
		orted ization		(described on lines 1-9 above or IRC section	_	ation in listed in		nızatıon i) of your		ation in organized	supp	ort	
	o i guii	, Lation				verning		ort?		US?			
					docur	ment?]		
	Yes No Yes No												

Total

Part II	Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
	(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Pι	ıblic Support		, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on							
_	its behalf The value of services or facilities					 		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					<u> </u>		
5	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	· (f)							
6	Public Support subtract line 5 from line							
	4							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts from line 4							
8	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties and income from similar							
_	sources							
9	Net income from unrelated business							
	activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss							
10	from the sale of capital assets (Explain in							
	Part IV)							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instructio	ns)		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and stop here		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	▶ □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15	Public Support Percentage for 2007 School	dule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.		this box	
	and stop here. The organization qualifies a				,			▶ □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				▶ □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa							· —
	organization meets the "facts and circums							► □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	Private Foundation. If the organization did	not check the b	oux on line 13, 1	oa, 160, 1/a or	1/D, check this	oox an	u see	▶ □
	ınstructions							F-1

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
С	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after 30 June, 1975		+				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or loss						
	from the sale of capital assets						
	(Explain in Part IV)						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶ □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (ne 13 column /f	<u> </u>	17	
	-			-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

▶□

Part IV	Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)
	Facts and Circumstances Test

Schedule A (Form 990 or 990-EZ) 2008

Software ID: Software Version:

EIN: 58-0566143

Name: Brenau University Inc

Form 990, Part VII - Section Aaa

	3										
		(C) Position (check all that apply)								(F)	
(A) Name and Title	(B) A verage hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
Peter D Miller , Chair	1 00	X						0	0	0	
Philip A Wilheit Sr , Vice Chair	1 00	Х						0	0	0	
James A Walters , Secretary	1 00	Х						0	0	0	
Carole Ann Carter Daniel , Treasurer	1 00	Х						0	0	0	
Dr Gale J Allen , Trustee	1 00	Х						0	0	0	
Melissa W Blanchard , Trustee	1 00	Х						0	0	0	
Raymond H Burch , Trustee	1 00	Х						0	0	0	
Robin Smith Dudley , Trustee	1 00	Х						0	0	0	
Kathryn Dunlap , Trustee	1 00	Х						0	0	0	
Roger E Dailey , Trustee	1 00	Х						0	0	0	
Elizabeth B Fisher , Trustee	1 00	Х						0	0	0	
John B Floyd , Trustee	1 00	Х						0	0	0	
Lily Grace M Hudson , Trustee	1 00	Х						0	0	0	
M Douglas Ivester , Trustee	1 00	Х						0	0	0	
John W Jacobs Jr , Chair Emeritus	1 00	Х						0	0	0	
Laura S Jester , Trustee	1 00	Х						0	0	0	
Angela B Johnston , Trustee	1 00	Х						0	0	0	
Mary Pat Ward King , Trustee	1 00	Х						0	0	0	
Richard H Leet PhD , Trustee	1 00	Х						0	0	0	
Ben E Lilly , Trustee	1 00	Х						0	0	0	
James E Mathis Jr , Trustee	1 00	Х						0	0	0	
Katherine F McMaster , Trustee	1 00	Х						0	0	0	
James H Moore , Trustee	1 00	Х						0	0	0	
Betty Verson Norton , Trustee	1 00	Х						0	0	0	
Mary E Raines , Trustee	1 00	Х						0	0	0	
Gary L Riley , Trustee	1 00	Х						0	0	0	
Lawrence B Schrage , Trustee	1 00	Х						0	0	0	
Erın M Seng , Trustee	1 00	Х						0	0	0	
Robert L Silverman , Trustee	1 00	Х						0	0	0	
Gail A Smith , Trustee	1 00	Х						0	0	0	

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa	•										
		(C) Position (check all that apply)							(E)	(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations	
Judge Sidney O Smith Jr , Trustee	1 00	Х						0	0	0	
Jane A Suggs , Trustee	1 00	Х						0	0	0	
Bob Swoszowskı , Trustee	1 00	Х						0	0	0	
Stuart R Vırgın , Trustee	1 00	Х						0	0	0	
Helen Ray , Provost	40 00			Х				145,255	0	17,924	
Scott A Briell , Sr VP Enrollment	40 00			Х				142,710	0	5,283	
James M Barco , Sr VP Instit Advanceme	40 00			х				118,049	0	15,529	
Dr Edward L Schrader , President	40 00			Х				378,581	0	62,968	
Wayne W Dempsey , Executive VP & CFO	40 00			х				160,935	0	17,493	
Gale H Starich , Dean School H&S	40 00				Χ			110,974	0	14,772	
William Fred Scott , Artist-in-Residence	19 00					Х		166,947	0	20,881	
Laney D Childers , VP Emeritas	40 00						Х	69,280	0	8,105	
Dr John S Burd , President Emeritas	15 00						Х	24,000	0	0	

OMB No 1545-0047

2008

Open to Public Inspection

Schedule D (Form 990) 2008

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Name of the organization
Brenau University Inc

58-0566143

			58-0566143	
Pa	organizations Maintaining Donor Action organization answered "Yes" to Form 99		Funds or Accounts.	Complete if the
	organization answered Tes to Form 55	(a) Donor advised funds	(b) Funds and ot	her accounts
1	Total number at end of year			
2	Aggregate Contributions to (during year)			
3	Aggregate Grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advis funds are the organization's property, subject to the o		onor advised	┌Yes ┌No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the benimpermissible private benefit?			┌ Yes
Pa	rt II Conservation Easements. Complete	f the organization answered "Yes'	' to Form 990, Part IV	, lıne 7.
1	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space	on or pleasure) Preservation of Preservation of	an historically importantl certified historic structur	re
2	Complete lines 2a-2d if the organization held a quali on the last day of the tax year	fied conservation contribution in the fo		ement :he End of the Year
а	Total number of conservation easements		2a	ine the or the rear
ь	Total acreage restricted by conservation easements		2b	
c	•		2c	
d	Number of conservation easements on a certified his	• •	2d	
	Number of conservation easements included in (c) a	•	<u> </u>	
3	Number of conservation easements modified, transfe	rred, released, extinguisned, or termina	ated by the organization o	iuring
	the taxable year 🕨			
4	Number of states where property subject to conserva	tion easement is located 🕨		
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		olations, and	┌Yes ┌No
6	Staff or volunteer hours devoted to monitoring, inspec	cting and enforcing easements during t	he year ►	
7	A mount of expenses incurred in monitoring, inspectir			
8	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	(d) above satisfy the requirements of s	ection	┌ Yes
9	In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easem	he footnote to the organization's financ		
Par	Complete if the organization answered "		s, or Other Similar A	Assets.
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or rese	arch in furtherance of pub	
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	oublic exhibition, education, or research		•
	(i) Revenues included in Form 990, Part VIII, line 1		► \$	86,400
	(ii) Assets included in Form 990, Part X		► \$	4,021,125
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFAS		for financial gain, provid	e the
а	Revenues included in Form 990, Part VIII, line 1		F \$	
b	Assets included in Form 990, Part X		► \$	

Cat No 52283D

Part	Organizations Maintaining Co	llections of Art	<u>, His</u>	tori	<u>cal Tre</u>	easu	ıres, or Otl	<u>he</u>	<u>r Similar</u>	Asse	ts (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th	ne fol	lowing th	nat ar	e a sıgnıfıcan	t u	se of its co	lection	ו	
а	Public exhibition		d	Γ	Loan or	rexc	hange progra	ms				
ь	Scholarly research		e	Г	Other							
с	✓ Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ın hov	w the	v further	the o	organization's	еx	empt purpo	seın		
	Part XIV				,		3					
5	During the year, did the organization solicit of							sım	ıılar	_		<u></u>
Dar	assets to be sold to raise funds rather than t							C141	orod "Voc		Yes	No
Pal	Trust, Escrow and Custodial A Part IV, line 9, or reported an an						anizacion ani	5 VV	ereu res	ιο Γι	ל ווו ול	90,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						or other asset	ts r	not	Г	Yes	
ь	If "Yes," explain why in Part XIV and comple	te the following tab	le									
										A mou	ınt	
c	Beginning balance						1	c				
d	Additions during the year						1	d				
е	Distributions during the year						1	e				
f	Ending balance						1	f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?							Γ	Yes	┌ No
ь	If "Yes," explain the arrangement in Part XIV	,										
Pa	rt V Endowment Funds. Complete	f the organization	n ans	wer	ed "Yes							
		(a)Current Year)Prior	Year	(c) T\	wo Years Back	(d)	Three Years B	ack (e)Four Y	ears Back
1a	Beginning of year balance	29,744,179										
Ь	Contributions	396,881										
C	Investment earnings or losses	-6,185,246										
d	Grants or scholarships	2.404.054										
e	Other expenditures for facilities and programs	2,194,851										
f	Administrative expenses											
g	End of year balance	21,760,963										
2	Provide the estimated percentage of the yea	r end balance held a	is									
а	Board designated or quasi-endowment											
Ь	Permanent endowment 100 000 %											
	Term endowment											
c 3a	Are there endowment funds not in the posses	ssion of the organiza	ation	thata	are held a	and a	administered 1	for	the			
	organization by	J							<u>-</u>		Yes	No
	(i) unrelated organizations									3a(i)		No
_	(ii) related organizations					•				3a(ii)		No.
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the second secon	•						•	[3b		
	t VI Investments—Land, Buildings					Λ D	art V line 1	<u></u>				
FGI	t vi investments—Land, bundings	s, and Equipme	11t. C		Cost or ot		(b)Cost or other			Т		
	Description of investment				s (investm		basis (other)		(c) Deprecia	ation	(d) Bo	ok value
	Land						2,367,3	66	1	\dashv		2,367,366
	Buildings						42,480,6	_	13.08	4,298 		9,396,337
	Leasehold improvements						, 7 9	•		· -		. ,
	Equipment						14,074,2	:06	10.66	8,572		3,405,634
	Other						2,230,5			2,877		1,227,625
	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, colun	nn (B,), line	10(c).)				►	.		6,396,962
	·								Schedu	ıle D (I	orm 9	90) 2008

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12.	
(a) Description of security or cateory (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		Coot on a criffound market variab
Closely-held equity interests		
Other Assets held in charitable remainder trust	1,917,279	F
Other Beneficial interest in perpetual trust	1,464,223	F
Other Assets held in deferred compensation	335,351	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	3,716,853	
Description Description Co.		2
Part VIII Investments—Program Related. Se		3. (c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, II (a) Descri		(b) Book value
Works of art	рион	4,021,125
Other assets		645,745
o their doores		015,713
Total. (Column (b) should equal Form 990, Part X, col.(B) line		▶ 4,666,870
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	X, line 25. (b) A mount	
Federal Income Taxes	(b) Amount	
Liability under remainder trusts	1,533,116	
Advances from federal gov't	450,443	
Liabilities under deferred compensa	335,351	
Lease obligations	1,523,790	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	3 842 700	

_	lotal revenue (Form 990, Part VIII, column (A), line 12)	1	45,010,570
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	40,172,973
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	4,837,597
4	Net unrealized gains (losses) on investments	4	-12,381,653
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-1,952,813
9	Total adjustments (net) Add lines 4 - 8	9	-14,334,466
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-9,496,869
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	
1	Total revenue, gains, and other support per audited financial statements	1	22,507,541
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
Ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-14,244,542
3	Subtract line 2e from line 1	3	36,752,083
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b 8,258,487		
c	Add lines 4a and 4b	4c	8,258,487
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	45,010,570
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	32,004,410
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	89,924
3	Subtract line 2e from line 1	3	31,914,486
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	8,258,487
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	40,172,973
Par	t XIV Supplemental Information		

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanation
Part III, Line 4		The University owns approximately 1,800 works of art as follows Photographs 200 Paintings 600 Works on paper 500 Ceramic (china, sculpture) 400 Sculpture 100 The collection furthers the University's exempt purpose as an educational institution by providing an invaluable educational resource. The collection highlights the notable art trends and focuses on contemporary art and art created by women. The collection helps students broaden their world view by exposing them to a variety of modes of self expression.

Employer identification number

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Schools

Attach to Form 990 or Form 990-EZ. To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

2008

Open to Public

enaı	u University Inc			
	58-0566	143	YES	NO
			1123	140
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charte other governing instrument, or in a resolution of its governing body?	r, bylaws,	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast medithe period of solicitation for students, or during the registration period if it has no solicitation program, in a that makes the policy known to all parts of the general community it serves? If "Yes," please describe If	a during a way "No,"		
	please explain The University publishes its nondiscriminatory policy on its website at http://www2009 brenau edu/index objectid=B141E2	cfm?	Yes	
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscribasis?	minatory 4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public deali	ng		
	with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate state	ement)		
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
b	Admissions policies?	5b		Νo
c	Employment of faculty or administrative staff?	5c		Νo
d	Scholarships or other financial assistance?	5d		Νo
е	Educational policies?	5e		Νo
f	Use of facilities?	5f		Νo
g	Athletic programs?	<u>5g</u>		Νo
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate sta	tement)		No
62	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
	Has the organization's right to such aid ever been revoked or suspended?	6b	163	No
	If you answered "Yes" to either 6a or b, please explain using an attached statement			
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through	gh 4 05		
	of Day, Drog. 75, 50, 1075, 2, C.B. 597, covering regist pendicerimination? If "No." attack on explanation	-	l vaa	

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As Filed Data -

DLN: 93493116000100

OMB No 1545-0047

Open to Public

Supplemental Information Regarding **Fundraising or Gaming Activities**

Department of the Treasury

(Form 990 or 990-EZ)

SCHEDULE G

xttach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV,

lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a. Internal Revenue Service Inspection Employer identification number Name of the organization Brenau University Inc 58-0566143 Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? **b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table (iii) Did fundraiser have (v) A mount paid to (vi) A mount paid to (i) Name of individual custody or (iv) Gross receipts (or retained by) (ii) Activity (or retained by) or entity (fundraiser) control of from activity fundraiser listed in organization contributions? col (i) Yes No Capital Campaign Marts & Lundy Inc 40,875 21,001 19,874 Nο

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or 3 licensing

-

Total

			(a) Event #1	(b) Event #2	(c) O ther Events	(d) Ta	tal Eve	nts
					(c) o ther Events	(Add co	(a) th	
			(event type)	(event type)	(total number)	C	ol (c))	
φ.	1	_	51,236		(columnition)		5	1,236
Revenue	2	Gross receipts	16,000				1	6,000
Æ		contributions	10,000					
	3	Gross revenue (line 1 minus line 2)	35,236				3	5,236
	4	Cash Prizes	12,600				1	2,600
Expenses	5	Non-cash Prizes						
ğ	6	Rent/Facility costs						
ក ប	7	Other direct expenses	17,472				1	7,472
Direct	8	Direct expense summary Add lin	es 4 through 7 ın column	(d)	🛌		3	0,072
_	9	Net income summary Combine li	nes 3 and 8 ın column (d)		🕨			5,164
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		'Yes" to Form 990, Pa	art IV, line 19, or rep	orted mo	re thar	า
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tota		
œ	1	Gross revenue				+		
	2	Cash prizes						
Expenses	3	Non-cash prizes						
<u>ភ</u> ច	4	Rent/facility costs						
Drea	5	Other direct expenses						
	6	Volunteer labor	Г Yes	┌ Yes	┌────────────────────────────────────			
	7	Direct expense summary Add line	s 2 through 5 in column (d)	.	,		
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)	🛌			
							Yes	No
9		er the state(s) in which the organiza			•			
a b		he organization licensed to operate No," Explain	gaming activities in each	ortnese states /		· 9a		
J		TO, Explain						
10a b		e any of the organization's gaming /es," Explain	icenses revoked, suspen	ded or terminated during	g the tax year?	10a		
U	11 1	es, Explain						
							1	1

			
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records		
	Name •		
	Address •		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
Ь	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue retained by the third party > \$		
c	If "Yes," enter name and address		
	Name •		
	Address 🟲		
16	Gaming manager information		
	Name 🟲		
	Gaming manager compensation 🕨 \$		
	Description of services provided 🟲		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year 📂 💲		

DLN: 93493116000100

OMB No 1545-0047

2008

Department of the Treasury

Brenau University Inc

Schedule I

(Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

> Open to Public Inspect ion

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990. Internal Revenue Service Name of the organization

Employer identification number

58-0566143

Part I General Inform	mation on Gra	nts and Assistance					
 Does the organization mathe selection criteria use Describe in Part IV the organization 	d to award the grai	nts or assistance?			ıbılıty for the grants or a	ssistance, and	□Yes ▽N
	IV, line 21 for ar edule I-1 if addi	ny recipient that rece tional space is			tes. Complete if the call if no one recipient rec		
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
2 Enter total number of sec					-		
3 Enter total number of other							•
For Paperwork Reduction Act Not				Cat No 500551			nedule I (Form 990) 2008

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Scholarships and Financial aid	836	7,992,042			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

raent it ier	keturn kererence	Explanation

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DLN: 93493116000100

OMB No 1545-0047

Schedule J (Form 990)

Compensation Information

2008

Department of the Treasury Internal Revenue Service For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

Attach to Form 990. To be completed by organizations
that answered "Yes" to Form 990, Part IV, line 23.

Open to Public Inspection

Name of the organization
Brenau University Inc

Employer identification number

58-0566143

Pa	Questions Regarding Compensation	<u>n</u>				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II		,			
	First class or charter travel	굣	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	<u>~</u>	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a w provision of all the expenses described above? If "!			1b	Yes	
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive			2	Yes	
3	Indicate which, if any, of the following the organizationganization's CEO/Executive Director Check all to Compensation committee		·			
	Independent compensation consultant	 -	Compensation survey or study			
	Form 990 of other organizations	٠, حا	Approval by the board or compensation committee			
	,	,	, , , , , , , , , , , , , , , , , , ,			
4	During the year, did any person listed in Form 990,	Part VII	I, Section A, line 1a			
а	Receive a severance payment or change of control	payment	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	ne applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must co	mplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	line 1a,	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	line 1a,	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νο
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		Νο
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III	•	·	8		Νο

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form	
_		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ	
Helen Ray	(ı) (ıı)	133,317	5,000	6,938	10,665	7,259	163,179		
Dr Edward L Schrader Jr	(ı) (ıı)	224,650	40,000	113,931	55,435	7,533	441,549		
Wayne W Dempsey	(ı) (ıı)	132,167	15,000	13,768	10,573	6,920	178,428		
William Fred Scott	(ı) (ıı)	166,383		564	13,311	7,570	187,828		
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanat ion
-		
	•	

DLN: 93493116000100

OMB No 1545-0047

Supplemental Information on Tax Exempt Bonds

Department of the Treasury Internal Revenue Service

Schedule K

(Form 990)

To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O.

Open to Public **Inspection**

	ne of the organization									Employer	identifica	tion num	ber	
Brei	nau University Inc									58-056	5143			
P	art I Bond Issues (Require	ed for 2008)						1						
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	(e) Issu	e Price	(f) Des	cription of	Purpose	(g) Defeased		(h) O n Behalf o Issuer	
											Yes	No	Yes	No
A	Gainesville Redevelopment Authority	58-1520209	362899BR6	05-17-	-2000	11,	,500,000	Fund constr building	uction of ca	mpus		x		x
Pa	art II Proceeds (Optional fo	or 2008)												1
1	Total Proceeds of Issue			4	Α	E	В	!	<u> </u>	Г)		E	
2	Gross Proceeds in Reserve Fund	ds												
3	Proceeds in Refunding or Defeas	sance Escrows												
4	Other Unspent Proceeds													
5	Issuance Costs from Proceeds													
6	Working Capital Expenditures fro	om Proceeds												
7	Capital Expenditures from Proce	eeds												
8	Year of Substantial Completion							_						
				Yes	No	Yes	No	Yes	No	Yes	No	Yes	š	No
9	Were the bonds issued as part o	f a current refunding iss	ue?											
10	Were the bonds issued as part o	f an advance refunding i	ssue?											
11	Has the final allocation of procee	eds been made?												
12	Does the organization maintain a final allocation of proceeds?	adequate books and rec	ords to support the											
Pa	rt III Private Business Use	e (Optional for 2008))	·										
					A		B 	C					E	
1	Was the organization a partner in which owned property financed b		mber of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No	Yes	-	No
2	Are there any lease arrangemen which may result in private busii	ts with respect to the fir	nanced property											
For	Paperwork Reduction Act Notice, see t	the Instructions for Form	990.			Cat No 501	193E			S	chedule K	(Form 99	0) 2008	3

Schedule K	(Form 990) 20	800	
Part III	Private Bu	siness Use	(Continued)

		4	A	E	3	(С	I	D	I	E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?										
3b	Are there any research agreements with respect to the financed property which may result in private business use?										
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?										
4	Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government										
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										
Pai	rt IV Arbitrage (Optional for 2008)										
		ı	Α	E	3	(<u>c</u>	ı	<u> </u>	ı	Ε
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T been filed wth respect to the bond issue?										
2	Is the bond issue a variable rate issue?										
3a	Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?										
ь	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?										
ь	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5											
	Were any gross proceeds invested beyond an available temporary period?										

DLN: 93493116000100

OMB No 1545-0047

Schedule L

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Transactions with Interested Persons

► Attach to Form 990 or Form 990-EZ. ▶ To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38b or 40b.

Open to Public Inspection

Employer identification number

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) Corrected (c)	Name of the organization Brenau University Inc				En	nploy	er ide	nt if icat	tion n	umber	
To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25, or Form 990-E2, Part V, line 35 2 Extert the amount of fax imposed on the organization memogras or discoulified persons counting the year under section 4055. 3 Total the amount of fax imposed on the organization memogras or discoulified persons counting the year under section 4055. 3 Total the amount of fax in any, on me 2, above, reministed by the organization. (a) Rema of interests person and purpose produce and the assessment "Yes" on Form 990, Part IV, line 26, or Form 990-E2, Part V, line 35. To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-E2, Part V, line 36. (b) Least to a mount of fax in a section of the	Part I Excess Benefit Transac	tions (section 501(c)(3) and section 50	1 (c)(4)							
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Emeritus) Emeritus) with 14 2BR/2B apartments for student housing Purchase price was based on independent third party appraisal The purchase was financed with 20 year seller financing of \$1,400,000 with 7 5% interest. As part of the financing the seller agreed to contribute \$420,000 per year to the University (\$18,333 26 for the University uses company for construction projects \$337,255 was spent with this company in fiscal year ending 2009 Competitive bids are taken to ensure fees are reasonable Featherbone Center LLC Partly owned by Philip A Wilhert & James A Walters (Trustees) Officers) President University entered into a 37,000 square foot operating lease for its nursing facility and dance classroom space An extensive search based on cost, suitability, and proximity to the main campus was made before selecting the property at the Featherbone Center Mr Walters and Mr Wilheit abstained from voting, Dr Edward L Schrader Jr Dr Edward L Schrader Jr Dr Edward L Schrader Jr Precent ownership interest in the home of the University will receive a return of its investment of \$226,500 plus 31 7 percent of the increase in the value of the	Jacobs Family Farthership El	Jacobs, Jr	"	pu	rchased f	or \$1	,400,	000 re			110
was based on independent third party appraisal. The purchase was financed with 20 year seller financing of \$1,400,000 with 7 5% interest As part of the financing the seller agreed to contribute \$20,000 per year to the University (\$18,333.26 for the year ended June 30, 2009). Carroll Daniel Construction Company Partly owned by Carole Ann Carter Daniel (Trustee) Partly owned by Philip A Wilheit & James A Walters (Trustee) Partly owned by Philip A Wilheit & James A Walters (Trustee)/ Featherbone Center LLC Partly owned by Philip A Wilheit & James A Walters (Trustee)/ (Trustee)/ Partly owned by Philip A Wilheit & James A Walters (Trustee)/ Partly owned by Philip A Wilheit & James A Walters (Trustee)/ (Trustee)/ Partly owned by Philip A Wilheit & James A Walters (Trustee)/ (Trustee)/ Partly owned by Philip A Wilheit & James A Walters (Trustee)/ (Trustee)/ Partly owned by Philip A Wilheit & James A Walters (Trustee)/ (Trustee)/ Partly owned by Philip A Wilheit & James A Walters (Trustee)/ Walters (Trustee)/ Partly owned by Philip A Wilheit & James A Walters (Trustee)/ Walters (Trustee)/ Partly owned by Philip A Wilheit & James A Walters (Trustee)/ Walters (Trustee)/ Partly owned by Philip A Wilheit & James A Walters (Trustee)/ Walters (Trustee)/ Partly owned by Carole (Trustee) The University entered into a 37,000 square foot operating lease for its nursing facility and dance classroom space An extensive search based on cost, suitability, and proximity to the main campus was made before selecting the property at the Featherbone Center Mr Walters and Mr Wilheit abstained from voting, Dr Schrader (University President) Precident Upon sale of the home of the University will receive a return of its investment of \$226,500 plus 31 7 percent of the increase in the value of the				I		-					
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DLN: 93493116000100

OMB No 1545-0047

Inspection

SCHEDULE M (Form 990)

Department of the Treasury

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

Non-Cash Contributions

Internal Revenue Service Name of the organization Brenau University Inc

Employer identification number

58-0566143

Ρa	rt I Types of Property				30-0300143			
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of de reven	etermi	nıng	
1	Art—Works of art	Х	2	_	Appraised value			
	Art—Historical treasures			00,400	Appraised value			
	Art—Fractional interests							
	Books and publications							
	Clothing and household							
_	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	7	74,453	Market quotations			
	Securities—Closely held stock .							
	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution (historic structures)							
14	Q ualified conservation contribution (other)							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxıdermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other (describe)							
	Other (describe)							
	Other (describe)							
	Other (describe)							
29	Number of Forms 8283 received which the organization complete Acknowledgement	d Form 828		ar for contributions for	29			1
					4.00.11		Yes	No
30a	During the year, did the organizate hold for at least three years from the date of					 	 	
	for the entire holding period? .		•			30a		No
Ь	If "Yes", describe the arrangeme					30a		
31	Does the organization have a gif			review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us	e third parti	ies or related organizations	to solicit, process, or sell i	non-cash			
	contributions?		· · · · · · · ·			32a	\ _{v a a}	
Į.	If "Yes", describe in Part II					JZA	162	
33	If the organization did not report	revenues i	n Column (c) for a type of r	ronerty for which Column (s	1) 15			
	checked, describe in Part II		Coranini (c) for a cype of p		.,			

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.										
Identifier	ReturnReference	Explanation								
240111111	Notal III Colored	Explanation								
	1	1								

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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008

Open to Public Inspection

Name	of	t he	OI	rga	nizat	ion
Brenau	Uni	versi	tν	Inc		

Employer identification number

58-0566143

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		Two University Trustees/Officers are members of a limited liability company that leases educational facilities to the University See Schedule L

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		The Form 990 is reviewed by the Executive Committee of the Board of Trustees and made available online for all Trustees to review prior to filing

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		Trustees and officers are required to disclose annually any potential conflicts of interest which are reviewed and monitered by the University

ldentifier	Return Reference	Explanation	
Form 990, Part VI, Section B, line 15		The compensation committee of the Board of Trustees reviewed comparability data supplied by a consultant to determine compensation of the President. The President used comparability data to determine recommended compensation of top management and key employees to the Compensation Committee.	

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 18		The University's federal filings are available upon request

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		The University's governing documents are available upon request

ldentifier	Return Reference	Explanation	
Part XI, Line 2c		The audit committee of the Board of Trustees reviews and approves the audited financial statements before they are issued. This process has not changed from the previous years.	

ldentifier	Return Reference	Explanation
Schedule G, Part I, Line 2b, Column (v)	Explanation of Fundraising Payments	Fundraiser provided consultation regarding the organization and operation of the capital campaign