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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
Lynn University Inc

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
3601 North Military Trail

City or town, state or country, and ZIP + 4
Boca Raton, FL 33431

D Employer identification number
59-1023117

E Telephone number
(561) 237-7181

G Gross receipts $ 93,886,346

F Name and address of Principal Officer
Kevin Ross
3601 North Military Trail
Boca Raton, FL 33431

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
(If "No," attach a list See instructions)

H(c) Group Exemption Number ▶

I Tax-exempt status ☑ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Web site: ▶ www lynn edu

K Type of organization ☑ Corporation ☐ trust ☐ association ☐ other ▶

L Year of Formation 1972 **M** State of legal domicile FL

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

The Mission of Lynn University is to provide the education, support and environment that enable students to reach their full potential and to prepare for success in the world

2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets		
3	Number of voting members of the governing body (Part VI, line 1a)	3	13
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	9
5	Total number of employees (Part V, line 2a)	5	1,180
6	Total number of volunteers (estimate if necessary)	6	20
7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	6,606,528	5,538,348
	9	Program service revenue (Part VIII, line 2g)	76,560,967	72,076,860
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,783,096	-345,937
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,320,078	710,991
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	86,270,669	77,980,262
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	14,056,902	13,523,342
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	33,496,573	36,798,637
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	85,122	0
	b	(Total fundraising expenses, Part IX, column (D), line 25 5,061,479)		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	29,776,702	28,458,442
	18	Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A))	77,415,299	78,780,421
	19	Revenue less expenses Subtract line 18 from line 12	8,855,370	-800,159
Net Assets or Fund Balances			**Beginning of Year**	**End of Year**
	20	Total assets (Part X, line 16)	119,878,406	115,345,945
	21	Total liabilities (Part X, line 26)	43,984,771	42,690,721
	22	Net assets or fund balances Subtract line 21 from line 20	75,893,635	72,655,224

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Please Sign Here

Signature of officer | Date 2010-05-06

Laurie Levine VP- Business & Finance
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ | Date | Check if self-employed ▶ ☐ | Preparer's PTIN (See Gen Inst)

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ ERNST & YOUNG US LLP
201 S Biscayne Blvd Ste3000
Miami, FL 331314330

EIN ▶

Phone no ▶ (305) 358-4111

May the IRS discuss this return with the preparer shown above? (See instructions) ☐ Yes ☐ No

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

1 Briefly describe the organization's mission

The Mission of Lynn University is to provide the education, support and environment that enable students to reach their full potential and to prepare for success in the world

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ No

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

3 Did the organization cease conducting or make significant changes in how it conducts any program services? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 36,164,123 including grants of $ 11,704,205) (Revenue $ 59,351,740)

ACADEMIC INSTRUCTION The university offers bachelor's, master's and a doctoral degree The academic program is designed for traditional aged students, as well as a growing population of adult learners Today, more than 2,000 students come from the local South Florida community, the United States, and more than 80 nations Presently, the university offers 4 master's degrees with 22 specializations as well as 1 doctoral degree with 2 majors and 4 undergraduate bachelor's degrees with 31 majors Lynn University is proud of its tradition of educating men and women who assume positions of responsibility in their professions and become leaders in their chosen professions The university, small by design, provides an environment within and outside the classroom in which a community of learners can pursue academic excellence and develop their skills as responsible global citizens Faculty, staff, and students contribute to an atmosphere that nurtures creativity, fosters achievement, values diversity, and encourages voluntarism The university is committed to student-centered learning, where faculty and staff provide personalized attention to students who have varying levels of academic proficiency and are motivated to excel A full range of academic and support programs are coordinated to serve the increasingly diverse needs of undergraduate and graduate students Lynn's academic curricula and programs are structured to provide a balance between the theoretical and the practical, along with opportunities to become involved in community-based organizations and industries Education and service are fully integrated to meet the changing needs of the local and global community This integrative design prepares our graduates to meet the dynamic needs of the emerging global society Additional and specialized academic support services are offered to provide academic assistance to help students remain in college and graduate These services are offered to students in a variety of forms with a varying fee schedule An academic resource named the Institute for Achievement and Learning is available to all students, including those with diagnosed learning differences Math, computer, and other subject-area tutors assist students A rigorous, new core curriculum-The Dialogues of Learning-was launched fall semester 2008 Core courses are required through all four years in the bachelor's degree program In each core class, faculty members measure student outcomes in competency areas including writing, quantitative reasoning, and scientific and technological literacy Presented in seminar rather than lecture format, the core courses are organized around life's big questions Dialogues of Self and Society, Dialogues of Belief and Reason, Dialogues of Justice and Civic Life Each January, all students are required to attend a J-term course Those are focused on innovation and offer intense two-and-a-half week experiences that include travel, civic activism, and other creative approaches to learning

4b (Code) (Expenses $ 15,754,468 including grants of $) (Revenue $ 273,663)

STUDENT SERVICES AND PROGRAMS A program of activities complements the academic program Students choose those activities that will contribute to their personal development and enjoyment - student government, service clubs, sports, social fraternities, and numerous special interest organizations In addition, the university offers a formal leadership certification program, available to all students Social activities include game shows, dances, comedians, live music, international festivals, films, pool parties, sports days, intramural sports, award dinners and novelty entertainment Individual interests ranging from the fine arts to professional football to gourmet dining can be found in South Florida Lynn University holds membership in the National Collegiate Athletic Association (NCAA), Division II, and the Sunshine State Athletic Conference Intercollegiate athletic programs are open to all students in accordance with NCAA and institutional eligibility standards Intercollegiate teams include men's soccer, basketball, baseball, golf, tennis, and women's golf, soccer, softball, volleyball, basketball and tennis All student-athletes are required to attend seminars on substance abuse and NCAA standards throughout the school year In the most recent year, nine of 11 teams had cumulative GPAs greater than 3 00 while posting an overall department GPA of 3 32 Of the 163 student-athletes, 112 earned a 3 00 or higher In addition to intercollegiate sports, students are encouraged to participate in a wide range of intramural programs, including basketball, flag football, softball, tennis and volleyball At least one registered nurse or physician's assistant is on duty during daytime hours in the Health Center, and works in conjunction with community medical services to provide adequate health care The Health Center provides treatment for minor ailments When further care is needed, referrals are made to local physicians and health care agencies Another Health Center staff member organizes wellness activities including yoga and exercise classes as well as students' strength training in Lynn's gym Counseling is provided on a private or group basis and records are maintained in strict confidence by the Director of Counseling Students are also urged to consult their individual instructors, Resident Assistants, and appropriate members of the university community, all of whom are professionally focused on assisting students In addition, alcohol and substance abuse literature and referral services are continually available through the Counseling Center The Center for Career Development provides a variety of services to assist students in evaluating, choosing and planning a career Professional staff and career counselors are available to help students set their career goals, investigate employment opportunities and interview with companies for which they would like to work or intern A library in the center provides information about a broad cross-section of employers, careers, internship opportunities, salary surveys, corporate training programs, career and online job opportunities The Center for International Programs and Services is an important source of information and provides assistance to international students while they are in the United States, as well as facilitating Study Abroad programs Campus Ministry at Lynn University is concerned with the personal growth of all students The university seeks to help its students understand how spirituality is experienced by people and encourages them to seek a fitting response to its presence in their lives A loving concern is shared for students of all faiths, respecting their freedom to maintain and express their own spiritual convictions, and facilitating access to their own spiritual leaders for worship, study and counsel

4c (Code) (Expenses $ 12,814,006 including grants of $ 1,819,137) (Revenue $ 10,547,191)

RESIDENCE HALLS, FOOD SERVICE AND BOOKSTORE The University maintains five residence halls that provide full living accommodations for more than half of its undergraduate student population Each room is furnished to meet students' needs, including telephone, TV cable, and wireless Internet service Students living on campus are required to be on the university meal plan The plan includes "freedom" options that let students dine in the campus grill or coffee shop during off hours Commuter students, faculty and visitors can purchase meals directly through the university's food service vendor The Lynn University Bookstore offers text and other trade books, school-branded clothing and accessories, as well as various other supplies

4d Other program services (Describe in Schedule O)

(Expenses $ 1,704,827 including grants of $) (Revenue $ 1,904,266)

4e Total program service expenses $ 66,437,424 *Must equal Part IX, Line 25, column (B).*

Part IV **Checklist of Required Schedules**

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		No
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8	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		No
b	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	Yes	
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? *If "Yes," complete Schedule F, Part II*	15		No
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? *If "Yes," complete Schedule F, Part III*	16		No
17	Did the organization report more than $15,000 on Part IX, column (A), line 11e? *If "Yes," complete Schedule G, Part I*	17		No
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		No
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		No
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		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	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		No
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	Yes	

Part IV Checklist of Required Schedules *(Continued)*

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
a	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**		No
b	Have a family member who had a direct or indirect business relationship with the organization? *If "Yes," complete Schedule L, Part IV*	**28b**		No
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**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	**33**		No
34	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**		No
35	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**		No
36	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**		No
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	**37**		No

Part V Statements Regarding Other IRS Filings and Tax Compliance

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, *Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable*	1a	157			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	2a	1,180			
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? **Note:** *If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.*			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		No
b	If "Yes," enter the name of the foreign country ______ See 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?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, *Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?*			5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	*Organizations that may receive deductible contributions under section 170(c).*					
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of $75 or more?			7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h		
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?			8		
9	*Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.*					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	*Section 501(c)(7) organizations.* Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	*Section 4947(a)(1) non-exempt charitable trusts.* Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

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

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.

			Yes	No
1a	Enter the number of voting members of the governing body	1a: 13		
b	Enter the number of voting members that are independent	1b: 9		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	the governing body?	8a	Yes	
b	each committee with authority to act on behalf of the governing body?	8b		No
9a	Does the organization have local chapters, branches, or affiliates?	9a		No
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		No

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? *If "No", go to line 13*	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			
a	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

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ own website ☐ another's website ☑ upon request

19 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

LAURIE LEVINE VP BUSFINANCE
3601 N MILITARY TRAIL
BOCA RATON, FL 33431
(561) 237-7181

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

* 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

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			

Part VII Continued

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply) Individual Trustee or Director	Institutional Trustee	Officer	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)	(F) Estimated amount of other compensation from the organization and related organizations
1b Total								3,187,120	0	555,548

2 Total number of individuals (including those in 1a) who received more than $100,000 in reportable compensation from the organization ▶34

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3	Yes	
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
GERRITS CONSTRUCTION INC 8177 GLADES ROAD BOCA RATON, FL 33434	GENERAL CONSTRUCTION	2,362,248
THE WACKENHUT CORPORATION 4200 WACKENHUT DRIVE PALM BEACH GARDENS, FL 33410	SECURITY SERVICES	1,380,582
FLORIDA GOLD COAST MECHANICAL INC 383 REDWOOD LANE BOCA RATON, FL 33487	AIR COND CONTRACTOR	604,506
NEWMAN ARCHITECTS LLC 300 YORK STREET NEW HAVEN, CT 06511	ARCHITECTURAL DESIGN	511,345
GENSLER 2020 K STREET NW WASHINGTON, DC 20006	STRATEGIC CONSULTING	238,126

2 Total number of independent contractors (including those in 1) who received more than $100,000 in compensation from the organization ▶ 8

Part VIII **Statement of Revenue**

			(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
Contributions, gifts, grants and other similar amounts	**1a** Federated campaigns . . **1a**					
	b Membership dues **1b**					
	c Fundraising events **1c**	135,568				
	d Related organizations . . . **1d**					
	e Government grants (contributions) **1e**	640,213				
	f All other contributions, gifts, grants, and similar amounts not included above **1f**	4,762,567				
	g Noncash contributions included in lines 1a-1f $ 23,987					
	h **Total (Add lines 1a-1f)** . . . . ▶		5,538,348			
Program Service Revenue		Business Code				
	2a Student tuition and related fees	611,310	59,351,740	59,351,740		
	b Residence-hall room and board fees	611,310	9,224,799	9,224,799		
	c Bookstore sales	611,310	1,322,392	1,322,392		
	d Camp fees	611,310	1,904,266	1,904,266		
	e Student activity income	611,310	273,663	273,663		
	f All other program service revenue					
	g **Total. Add lines 2a-2f** . . . . ▶ $ 72,076,860					
Other Revenue	**3** Investment income (including dividends, interest other similar amounts) . . . . ▶		1,224,678			1,224,678
	4 Income from investment of tax-exempt bond proceeds . . ▶		0			
	5 Royalties		0			

	(i) Real	(ii) Personal
6a Gross Rents	683,840	
b Less rental expenses	163,944	
c Rental income or (loss)	519,896	

		(A)	(B)	(C)	(D)
6d Net rental income or (loss) . . . . ▶		519,896			519,896

	(i) Securities	(ii) Other
7a Gross amount from sales of assets other than inventory	14,107,030	11,000
b Less cost or other basis and sales expenses	15,679,306	9,339
c Gain or (loss)	-1,572,276	1,661

		(A)	(B)	(C)	(D)
7d Net gain or (loss) . . . . ▶		-1,570,615			-1,570,615
8a Gross income from fundraising events (not including $ 39,200 of contributions reported on line 1c) See Part IV, line 18 *Attach Schedule G if total exceeds $15,000* . . . . **a**	135,568				
b Less direct expenses . . . **b**	53,495				
c Net income or (loss) from fundraising events . . ▶		-14,295			-14,295
9a Gross income from gaming activities See part IV, line 19 *Complete Schedule G if total exceeds $15,000* **a**					
b Less direct expenses . . . **b**					
c Net income or (loss) from gaming activities . . . ▶		0			
10a Gross sales of inventory, less returns and allowances . **a**					
b Less cost of goods sold . . **b**					
c Net income or (loss) from sales of inventory . . ▶		0			
Miscellaneous Revenue	Business Code				
11a Insurance reimbursement	900,099	35,073			35,073
b COMMUNITY CULTURAL AFFAIRS	900,099	139,107			139,107
c All other revenue	900,099	31,210			31,210
d All other revenue					
e **Total. Add lines 11a-11d** . . . . $ 205,390					
12 **Total Revenue.** Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e . . . . . . ▶		77,980,262	72,076,860		365,054

Part IX **Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U S See Part IV, line 22	13,523,342	13,523,342		
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	3,325,973	1,729,418	1,086,983	509,572
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	25,823,459	21,101,584		2,037,338
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	937,307	695,632	153,805	87,870
9	Other employee benefits	4,734,434	3,540,422	769,414	424,598
10	Payroll taxes	1,977,464	1,571,138	237,565	168,761
11	Fees for services (non-employees)				
a	Management	855,478	455,775	122,885	276,818
b	Legal	85,791		85,791	
c	Accounting	134,699		134,699	
d	Lobbying	0			
e	Professional fundraising *See Part IV, line 17* . .	0			
f	Investment management fees	204,343		204,343	
g	Other	0			
12	Advertising and promotion	1,426,488	889,158	53,670	483,660
13	Office expenses	3,380,284	2,945,753	161,215	273,316
14	Information technology	589,862	117,733	457,506	14,623
15	Royalties . .	0			
16	Occupancy	4,276,740	3,748,916	402,923	124,901
17	Travel	1,359,392	1,144,908	108,280	106,204
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0			
19	Conferences, conventions and meetings	233,584	186,812	30,713	16,059
20	Interest	1,341,871	1,252,368	59,311	30,192
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	5,859,303	5,468,488	258,981	131,834
23	Insurance	2,184,033	2,060,630	81,775	41,628
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)				
a	Security	1,367,468	1,367,468		
b	Student programming	1,087,505	1,087,505		
c	STUDY TOURS/INSTRNL FEES	967,688	967,688		
d	Recruitment	405,767	363,200	42,567	
e	Dues and subscriptions	326,904	203,041	90,178	33,685
f	All other expenses	2,371,242	2,016,445	54,377	300,420
25	**Total functional expenses.** Add lines 1 through 24f	78,780,421	66,437,424	7,281,518	5,061,479
26	**Joint Costs.** Check ☐ 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				

Part X Balance Sheet

					(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			16,233,801	1	20,427
	2	Savings and temporary cash investments			0	2	11,028,716
	3	Pledges and grants receivable, net			8,942,633	3	9,982,455
	4	Accounts receivable, net			796,792	4	739,263
	5	Receivables from current and former officers, directors, trustees, key employees or other related parties *Complete Part II of Schedule L*				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) *Complete Part II of Schedule L*				6	
	7	Notes and loans receivable, net			1,925,099	7	2,167,747
	8	Inventories for sale or use			451,228	8	682,687
	9	Prepaid expenses and deferred charges			1,836,502	9	2,029,505
	10a	Land, buildings, and equipment cost basis	10a	123,196,998			
	b	Less accumulated depreciation *Complete Part VI of Schedule D*	10b	61,841,007	60,036,065	10c	61,355,991
	11	Investments—publicly traded securities			29,120,209	11	27,188,352
	12	Investments—other securities See Part IV, line 11 *Complete Part VII of Schedule D*			149,398	12	0
	13	Investments—program-related See Part IV, line 11 *Complete Part VIII of Schedule D*				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11 *Complete Part IX of Schedule D*			386,679	15	150,802
	16	**Total assets.** *Add lines 1 through 15 (must equal line 34)*			119,878,406	16	115,345,945
Liabilities	17	Accounts payable and accrued expenses			4,722,555	17	5,588,031
	18	Grants payable				18	
	19	Deferred revenue			8,337,562	19	6,151,715
	20	Tax-exempt bond liabilities			27,353,750	20	26,523,116
	21	Escrow account liability *Complete Part IV of Schedule D*				21	
	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*			0	22	2,376,727
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable				24	
	25	Other liabilities *Complete Part X of Schedule D*			3,570,904	25	2,051,132
	26	**Total liabilities.** *Add lines 17 through 25*			43,984,771	26	42,690,721
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**					
	27	Unrestricted net assets			48,212,309	27	42,647,616
	28	Temporarily restricted net assets			10,163,602	28	12,339,789
	29	Permanently restricted net assets			17,517,724	29	17,667,819
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			75,893,635	33	72,655,224
	34	Total liabilities and net assets/fund balances			119,878,406	34	115,345,945

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ cash ☑ accrual ☐ other			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	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	

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.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Lynn University Inc

Employer identification number
59-1023117

Part I Reason for Public Charity Status (to be completed by all organizations) (See Instructions)

The organization is not a private foundation because it is (Please check only **one** organization)

1 ☐ A church, convention of churches, or association of churches described in **Section 170(b)(1)(A)(i).**

2 ☑ A school described in **Section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **Section 170(b)(1)(A)(iii).** (Attach Schedule H)

4 ☐ A medical research organization operated in conjunction with a hospital described in **Section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **Section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **Section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **Section 170(b)(1)(A)(vi)** (Complete Part II)

8 ☐ A community trust described in **Section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **Section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **Section 509(a)(4).** (See instructions)

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **Section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally Integrated **d** ☐ Type III - Other

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

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

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

		Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?	**11g(i)**		No
(ii) a family member of a person described in (i) above?	**11g(ii)**		No
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		No

h Provide the following information about the organizations the organization supports

(i) Name of Supported Organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 9 above or IRC section **(See Instructions)**)	**(iv)** Is the organization in col **(i)** listed in your governing document?		**(v)** Did you notify the organization in col **(i)** of your support?		**(vi)** Is the organization in col **(i)** organized in the U S ?		**(vii)** Amount of support?
			Yes	**No**	**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.)

Public Support

Calendar 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						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add line 1-3						
5 The portion of total contribution by each 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						

Total Support

Calendar year (or fiscal year beginning in)	**(a)** 2004	**(b)** 2005	**(c)** 2006	**(d)** 2007	**(e)** 2008	**(f)** Total
7 Amounts 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 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 instructions) | **12** |

13 **First Five Years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Computation of Public Support Percentage

14 Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f)) | **14** |

15 Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f | **15** |

16a **33 1/3% Test - 2008.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% Test - 2007.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10% Facts and Circumstances Test - 2008.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10% Facts and Circumstances Test - 2007.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private Foundation.** If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶☐

Part III **Support Schedule for Organizations Described in IRC 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar 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 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total** Add lines 1-5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or $5,000						
c Total of lines 7a and 7b						
8 **Public Support** (Substract line 7c from line 6)						

Total Support

Calendar year (or fiscal year beginning in)	**(a)** 2004	**(b)** 2005	**(c)** 2006	**(d)** 2007	**(e)** 2008	**(f)** Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total Support** (Add lines 9, 10c, 11 and 12)						

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Computation of Public Support Percentage

15 Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	**15**	
16 Public Support Percentage for 2007 Schedule A, Part IV-A, line 27g	**16**	

Computation of Investment Income Percentage

17 Investment Income Percentage for **2008** (line 10c column (f) divided by line 13 column (f))	**17**	
18 Investment Income Percentage from **2007** Schedule A, Part IV-A, line 27h	**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 ▶☐

b **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 ▶☐

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

Part IV **Supplemental Information.** 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 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.**

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Lynn University Inc

Employer identification number
59-1023117

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate Contributions to (during year)		
3	Aggregate Grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? ☐ Yes ☐ No

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

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

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

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

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year ▶

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ 9,651

(ii) Assets included in Form 990, Part X ▶ $ 2,073,830

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $

b Assets included in Form 990, Part X ▶ $

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

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

a ☑ Public exhibition
b ☑ Scholarly research
c ☑ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☑ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain why in Part XIV and complete the following table

			Amount
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

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

		(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a	Beginning of year balance	17,767,724				
b	Contributions	972,502				
c	Investment earnings or losses	-1,748,039				
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance	16,992,187				

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ 1 346 %

b Permanent endowment ▶ 98 654 %

c Term endowment ▶

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

			Yes	No
	(i) unrelated organizations	3a(i)		No
	(ii) related organizations	3a(ii)		No
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land	110,000	1,145,045		1,255,045
b Buildings		71,735,592	30,006,777	41,728,815
c Leasehold improvements				
d Equipment		31,381,831	24,695,490	6,686,341
e Other		18,824,530	7,138,740	11,685,790
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				61,355,991

Part VII 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		
Closely-held equity interests		
Other		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	**(b)** Book value	**(c)** Method of valuation 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, line 15.

(a) Description	**(b)** Book value
Split interest agreement	150,802
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of Liability	**(b)** Amount
Federal Income Taxes	
Financial derivative	1,984,551
Annuities payable	66,581
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	2,051,132

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	77,980,262
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	78,780,421
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-800,159
4	Net unrealized gains (losses) on investments	4	-2,604,399
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	166,147
9	Total adjustments (net) Add lines 4 - 8	9	-2,438,252
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-3,238,411

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	62,548,762
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	-1,921,132		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	-13,523,464		
e	Add lines **2a** through **2d**			2e	-15,444,596
3	Subtract line **2e** from line **1**			3	77,993,358
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	204,343		
b	Other (Describe in Part XIV)	4b	-217,439		
c	Add lines **4a** and **4b**			4c	-13,096
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	77,980,262

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	65,270,175
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d	217,439		
e	Add lines **2a** through **2d**			2e	217,439
3	Subtract line **2e** from line **1**			3	65,052,736
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	204,343		
b	Other (Describe in Part XIV)	4b	13,523,342		
c	Add lines **4a** and **4b**			4c	13,727,685
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	78,780,421

Part XIV Supplemental Information

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 X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation
The University has a collection of African Art, displayed in the library	Schedule D, Part III, line 4	The collection of African Art includes sculptures, carvings and textile arts, which are displayed in open areas of the University library for the enjoyment of the public The study of these pieces is incorporated into courses in art history, art appreciation and intercultural studies University endowment funds Schedule D, Part V, question 4 The University's endowment consists of approximately 45 individual funds established for a variety of educational purposes, scholarly development, and to enhance student life on campus Its endowment includes both donor-restricted and funds, classified by the Board of Trustees, to function as endowments and to further these goals Schedule D, Part X - FIN 48 Footnote Lynn University is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code The University accounts for its income tax related matters under FASB Interpretation No 48, Accounting for Uncertainty in Income Taxes- an interpretation of FASB Statement No 109 (FIN 48) FIN 48 clarifies the accounting and financial statement reporting for uncertainty in income taxes recognized in an entity's financial statements in accordance with SFAS 109, Accounting for Income Taxes FIN 48 also prescribes a recognition threshold and measurement standard for the financial recognition and measurement of a tax position taken or expected to be taken in a tax return In addition, FIN 48 provides guidance on de-recognition, classification, interest and penalties, accounting in interim periods, disclosure and transition Schedule D, Part XI, Line 8 Gain (loss) - Pension related changes - 166,147 Schedule D, Part XII, Line 2d Student Aid - (13,523,242) Gain (loss) - Split interest agreement - (122) Total - (13,523,364) Schedule D, Part XII, Line 4b Rental Expenses - (163,944) Fundraising Expenses - (53,495) Total - (217,439) Schedule D, Part XIII, Line 2d rental Expenses - 163,944 Fundraising Expenses- 53,495 Total - 217,439 Schedule D, Part XIII, Line 4b Student Aid - 13,523,242

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SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Lynn University Inc

Employer identification number
59-1023117

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	**1**	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?	**2**	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain LYNN UNIVERSITY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, GENDER, RELIGION, NATIONALITY, ETHNIC ORIGIN, DISABILITY AND/OR AGE IN THE ADMINISTRATION OF ITS EDUCATIONAL AND ADMISSIONS POLICIES, SCHOLARSHIPS AND LOAN PROGRAMS, ATHLETIC AND/OR OTHER SCHOOL ADMINISTERED PROGRAMS	**3**	Yes	
4	Does the organization maintain the following?			
a	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 nondiscriminatory basis?	**4b**	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 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 statement)			
5	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	**5a**		No
b	Admissions policies?	**5b**		No
c	Employment of faculty or administrative staff?	**5c**		No
d	Scholarships or other financial assistance?	**5d**		No
e	Educational policies?	**5e**		No
f	Use of facilities?	**5f**		No
g	Athletic programs?	**5g**		No
h	Other extracurricular activities?	**5h**		No
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	**6a**	Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	**6b**		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 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	**7**	Yes	

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SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ **Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.**

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Lynn University Inc

Employer identification number
59-1023117

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

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance . . . . ☐ **Yes** ☐ **No**

2 **For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed)

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees or agents in region	**(d)** Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in region	**(f)** Total expenditures in region
Europe (Including Iceland and Greenland)			Program Services	Study Tours	205,723
Europe (Including Iceland and Greenland)			Program Services	Semester Abroad	147,246
Middle East and North Africa			Program Services	Study Tours	73,309
South America			Program Services	Study Tours	68,003
East Asia and the Pacific			Program Services	Study Tours	48,210
Central America and the Caribbean			Program Services	Study Tours	33,974
Russia and the Newly Independent States			Program Services	Study Tours	22,558
Sub-Saharan Africa			Program Services	Study Tours	14,126
Totals . . . . . ▶					613,149

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 . . . . ▶ ☐
Use Schedule F-1 if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . ▶

3 Enter total number of other organizations or entities . . . . ▶

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	**(b)** Region	**(c)** Number of recipients	**(d)** Amount of cash grant	**(e)** Manner of cash disbursement	**(f)** Amount of non-cash assistance	**(g)** Description of non-cash assistance	**(h)** Method of valuation (book, FMV, appraisal, other)

Part IV Supplemental Information

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

Identifier	ReturnReference	Explanation
Part IV - Additional Information		Method Used to Account for Expenditures The University accounts for revenue and expenditures on the accrual basis Direct expenditures for study tours are tracked separately Description of Study Abroad Program Lynn University offers its students a variety of study abroad opportunities all around the world These programs provide intercultural and historical perspective, enhancing the educational mission of the school

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

▶ Attach 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.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Lynn University Inc

Employer identification number
59-1023117

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

a ☐ Mail solicitations
b ☐ Email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? ☐ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization Form 990-EZ filers are not required to complete this table

(i) Name of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions?		**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
		Yes	**No**			
Total ▶						

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

FL

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than $5,000.

		(a) Event #1 Golf Tournament (event type)	(b) Event #2 Auction (event type)	(c) Other Events 0 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 Gross receipts	112,610	62,158		174,768
	2 Less Charitable contributions	85,995	49,573		135,568
	3 Gross revenue (line 1 minus line 2)	26,615	12,585		39,200
Direct Expenses	4 Cash Prizes				
	5 Non-cash Prizes				
	6 Rent/Facility costs				
	7 Other direct expenses	32,874	20,621		53,495
	8 Direct expense summary Add lines 4 through 7 in column (d) ▶				53,495
	9 Net income summary Combine lines 3 and 8 in column (d) ▶				-14,295

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶				

			Yes	No
9	Enter the state(s) in which the organization operates gaming activities ______			
a	Is the organization licensed to operate gaming activities in each of these states?	9a		
b	If "No," Explain			
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a		
b	If "Yes," Explain			
11	Does the organization operate gaming activities with nonmembers?	11		
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12		

			Yes	No
13 Indicate the percentage of gaming activity operated in				
a The organization's facility	**13a**			
b An outside facility	**13b**			
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**		
b If "Yes," enter the amount of gaming revenue received by the organization ► $ ______ and the amount of gaming revenue retained by the third party ► $ ______				
c If "Yes," enter name and address Name ► Address ►				
16 Gaming manager information Name ► Gaming manager compensation ► $ ______ Description of services provided ► ☐ Director/officer ☐ Employee ☐ Independent contractor				
17 Mandatory distributions				
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		**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 ► $				

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Lynn University Inc

Employer identification number
59-1023117

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 if additional space is needed . . . . . ▶ ☐

1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2 Enter total number of section 501(c)(3) and government organizations . . . . . ▶

3 Enter total number of other organizations . . . . . ▶

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)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance
Athletic Awards Scholarship	135	3,148,266			
Academic Awards Scholarship	730	4,993,924			
Need Based Awards Scholarship	557	5,381,152			

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

See Additional Data Table

Identifier	**Return Reference**	**Explanation**
Form 990, Schedule I	Description of Organization's Procedures for Monitoring the Use of Grants	THE UNIVERSITY AWARDS GRANTS AND LOANS BASED ON A SCHOLARSHIP PROGRAM AND THE FEDERAL GOVERNMENT REQUIREMENTS FOR ALL PROGRAMS, THE FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) MUST BE FILLED OUT AND ELIGIBLITY IS DETERMINED BASED ON THE INFORMATION PROVIDED THE GRANT AWARDED IS CREDITED TO THEIR TUITION AT LYNN UNIVERSITY

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Lynn University Inc

Employer identification number
59-1023117

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☑ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☑ Compensation committee ☑ Written employment contract ☑ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a			
a	Receive a severance payment or change of control payment?	**4a**	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization?	**5b**		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No

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-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
KEVIN ROSS	(i)	245,015	31,500	61,230	42,717	21,364	401,826	
	(ii)	0	0	0			0	
GREG MALFITANO	(i)	207,179	0	50,859	107,974	18,545	384,557	
	(ii)	0	0	0			0	
LAURIE LEVINE	(i)	192,210	0	14,934	31,982	18,684	257,810	
	(ii)	0	0	0			0	
JUDITH NELSON	(i)	183,581	0	21,821	10,265	17,845	233,512	
	(ii)	0	0	0			0	
MARGARET RUDDY	(i)	170,781	0	20,500	55,979	477	247,737	
	(ii)	0	0	0			0	
CYNTHIA PATTERSON	(i)	175,853	0	9,392	9,392	11,968	206,605	
	(ii)	0	0	0			0	
JASON WALTON	(i)	144,083	0	7,778	7,778	16,379	176,018	
	(ii)	0	0	0			0	
MICHELE MORRIS	(i)	123,185	0	20,500	7,308	6,066	157,059	
	(ii)	0	0	0			0	
CHRISTIAN BONIFORTI	(i)	129,660	0	6,323	5,531	16,645	158,159	
	(ii)	0	0	0			0	
DONALD ROSS	(i)	121,910	0	11,635	0	17,428	150,973	
	(ii)	0	0	0			0	
JAMES HUNDRIESER	(i)	50,908	0	79,857	6,400	5,304	142,469	
	(ii)	0	0	0			0	
DIANE DICERBO	(i)	152,235	0	20,500	7,397	15,632	195,764	
	(ii)	0	0	0			0	
RUSSELL BOISJOLY	(i)	155,802	0	12,074	8,625	12,425	188,926	
	(ii)	0	0	0			0	
RALPH NORCIO	(i)	160,197	0	5,687	5,687	11,075	182,646	
	(ii)	0	0	0			0	
MATTHEW CHALOUX	(i)	127,176	5,250	15,674	6,858	16,445	171,403	
	(ii)	0	0	0			0	
MARSHA GLINES	(i)	135,526	0	7,204	7,204	6,120	156,054	
	(ii)	0	0	0			0	

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

Identifier	Return Reference	Explanation
Supplemental Compensation Information	Schedule J, Part III	Part I, line 1a The University pays for membership at the Royal Palm Golf and Country Club for the purposes of fundraising and development for Donald Ross, President Emeritus and former trustee, and Kevin Ross, President Total charges for Donald Ross in 2008 were $17,536 It was determined that 20% of this amount ($3,507) was related to personal use, and therefore included in taxable income for the year Total charges for Kevin Ross in 2008 were $30,703 It was determined that 20% of this amount ($6,140) was related to personal use, and therefore included in taxable income for the year Part I, Line 4a During the year ended June 30, 2008 Mr Hundrieser received a payment of $56,452 , which was contingent upon his separation from service Part I, Line 4b The University maintains a nonqualified supplemental deferred compensation plan for the current President, Dr Kevin M Ross, to supplement the retirement benefit program maintained by the University, and to encourage the retention of the President's services for a substantial period of time The plan is unfunded, and vests on July 1, 2016, or upon death or disability of the President, change in control of the University or early termination of the plan No benefits were paid under the executive plan for the year ended June 30, 2009 The change in actuarial value for Kevin Ross was 29,340 The University maintains a Supplemental Executive Retirement Plan (SERP) to recognize the vital and substantial services rendered by the University's senior executives, and provide appropriate benefits in recognition of long, continuous service for the betterment of the University The SERP constitutes an unfunded promise to pay, in the future, an annual benefit equal to a percentage of final average salary Participants become 100% vested upon reaching retirement the age of 65, assuming continuous service to the University In the event of change in control of the University, or termination of the Plan, participants will receive a lump-sum distribution equal to the actuarially determined value of the plan benefit No benefits were paid under the Executive Plan for the year ended June 30, 2009 The change in actuarial value for each individual is as follows Greg Malfitano 96,694, Laurie Levine 21,438 and Margaret Ruddy 46,397

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

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.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Lynn University Inc

Employer identification number
59-1023117

Part I Bond Issues *(Required for 2008)*

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased Yes	(g) Defeased No	(h) On Behalf of Issuer Yes	(h) On Behalf of Issuer No
A	Palm Beach County Educational Facilities Authority	52-1562288	696506AC8	06-30-2009	5,488,116	SEE SCHEDULE O		X		X

Part II Proceeds *(Optional for 2008)*

		A	B	C	D	E
1	Total Proceeds of Issue					
2	Gross Proceeds in Reserve Funds					
3	Proceeds in Refunding or Defeasance Escrows					
4	Other Unspent Proceeds					
5	Issuance Costs from Proceeds					
6	Working Capital Expenditures from Proceeds					
7	Capital Expenditures from Proceeds					
8	Year of Substantial Completion					

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No	E Yes	E No
9	Were the bonds issued as part of a current refunding issue?										
10	Were the bonds issued as part of an advance refunding issue?										
11	Has the final allocation of proceeds been made?										
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?										

Part III Private Business Use *(Optional for 2008)*

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

Part III Private Business Use *(Continued)*

		A		B		C		D		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?										
3c	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?										

Part IV Arbitrage *(Optional for 2008)*

		A		B		C		D		E	
		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?										
b	Name of provider										
c	Term of hedge										
4a	Were gross proceeds invested in a GIC?										
b	Name of provider										
c	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?										
6	Did the bond issue qualify for an exception to rebate?										

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Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Lynn University Inc

Employer identification number
59-1023117

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

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

1 (a) Name of disqualified person	(b) Description of transaction	(c) Corrected? Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ $

Part II Loans to and/or From Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization? To	From	(c) Original principal amount	(d) Balance due	(e) In default? Yes	No	(f) Approved by board or committee? Yes	No	(g) Written agreement? Yes	No
Total . . . . . ▶ $										

Part III Grants or Assistance Benefitting Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance
na	Granddaughter of Trustee	Scholarship

Part IV Business Transactions Involving Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No

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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.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Lynn University Inc

Employer identification number
59-1023117

Identifier	Return Reference	Explanation
Supplemental Information		Part III, Line 4d Children's Summer Camps and Other Special Educational Programs During the summer months between academic years for traditional college students, a portion of the university's educational facilities are used to provide instruction to a combined enrollment of approximately 3,000 children attending three three-week summer camp sessions and to groups of adults enrolled in special educational programs Part VI - Governance, Management and Disclosure 2 - Kevin Ross and Donald Ross have a family relationship 8(b) - Historically, minutes have been recorded and distributed for all meetings of the Board of Trustees, but not for those of the sub-committees Beginning January 1, 2010 minutes have been recorded and distributed for sub-committee meetings, as well 10 - A draft of the return was reviewed by the Director of Accounting and the Vice President for Business and Finance Subsequently, an electronic draft of Form 990 was provided to all board members for their review and input After incorporating any necessary changes, the Board of Trustees met with the external preparer, Ernst & Young, for a final review before filing 12(c)- Each year, all officers, directors, trustees and key employees are required to sign a disclosure letter detailing any relationships or business transactions with other members of the group, as well as with any of the top five contractors These disclosures are reviewed by the Vice President for Business and Finance, and the Chief of Staff/Board Liaison In the event of any conflict of interest, or the appearance of any such conflict, it is incumbent upon the relevant board member(s)or director(s) to recuse themselves from voting on any related issues or transactions 15 - Compensation (a) The President's compensation and benefit package is reviewed annually by the executive committee of the Board of Trustees This committee evaluates performance against pre-determined goals In addition, the Board utilizes an outside compensation expert to provide independent information about industry practices and benchmarking among comparable organizations, in determining an appropriate per cent increase (b) The University retained an outside expert to do a compensation and benefits study of all employees, including officers of the organization This comprehensive study was performed three years ago, and provided guidance regarding annual increases As new positions are created, or market conditions warrant, this expert is consulted on a case-by-case basis The University provides benefits according to written standard policies If any benefit is granted outside of these policies, board approval is required (c) The President conducts annual performance reviews of all officers, based on pre-determined goals He then makes recommendations regarding compensation to the Chair of the Board for her approval 19 - The conflict of interest policy and Form 990 are provided upon request Schedule K, Part I Description Finance purchase of property refunded bonds- date of original issue 5/27/05

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 59-1023117
Name: Lynn University Inc

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
KEVIN ROSS	(i)	245,015	31,500	61,230	42,717	21,364	401,826	
	(ii)	0	0	0			0	
GREG MALFITANO	(i)	207,179	0	50,859	107,974	18,545	384,557	
	(ii)	0	0	0			0	
LAURIE LEVINE	(i)	192,210	0	14,934	31,982	18,684	257,810	
	(ii)	0	0	0			0	
JUDITH NELSON	(i)	183,581	0	21,821	10,265	17,845	233,512	
	(ii)	0	0	0			0	
MARGARET RUDDY	(i)	170,781	0	20,500	55,979	477	247,737	
	(ii)	0	0	0			0	
CYNTHIA PATTERSON	(i)	175,853	0	9,392	9,392	11,968	206,605	
	(ii)	0	0	0			0	
JASON WALTON	(i)	144,083	0	7,778	7,778	16,379	176,018	
	(ii)	0	0	0			0	
MICHELE MORRIS	(i)	123,185	0	20,500	7,308	6,066	157,059	
	(ii)	0	0	0			0	
CHRISTIAN BONIFORTI	(i)	129,660	0	6,323	5,531	16,645	158,159	
	(ii)	0	0	0			0	
DONALD ROSS	(i)	121,910	0	11,635	0	17,428	150,973	
	(ii)	0	0	0			0	
JAMES HUNDRIESER	(i)	50,908	0	79,857	6,400	5,304	142,469	
	(ii)	0	0	0			0	
DIANE DICERBO	(i)	152,235	0	20,500	7,397	15,632	195,764	
	(ii)	0	0	0			0	
RUSSELL BOISJOLY	(i)	155,802	0	12,074	8,625	12,425	188,926	
	(ii)	0	0	0			0	
RALPH NORCIO	(i)	160,197	0	5,687	5,687	11,075	182,646	
	(ii)	0	0	0			0	
MATTHEW CHALOUX	(i)	127,176	5,250	15,674	6,858	16,445	171,403	
	(ii)	0	0	0			0	
MARSHA GLINES	(i)	135,526	0	7,204	7,204	6,120	156,054	
	(ii)	0	0	0			0	

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 59-1023117
Name: Lynn University Inc

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

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

Additional Data

Software ID:
Software Version:
EIN: 59-1023117
Name: Lynn University Inc

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply) Individual Trustee or Director	Institutional Trustee	Officer	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)	(F) Estimated amount of other compensation from the organization and related organizations
KEVIN ROSS , PRESIDENT	40 0	X		X				337,745	0	64,081
Jan Carlsson , TRUSTEE	2 0	X						0	0	0
JOHN T HANNIFAN , TRUSTEE	2 0	X						0	0	0
MARY E HENKE , TRUSTEE	2 0	X						0	0	0
ARTHUR E LANDGREN , SECRETARY & TRUSTEE	40 0	X						46,761	0	2,110
JOHN LANGAN , TRUSTEE	2 0	X						0	0	0
IRVING R LEVINE , DEAN EMERITUS & TRUSTEE	40 0	X						95,912	0	16,890
CHRISTINE E LYNN , CHAIRPERSON	2 0	X						0	0	0
JOHN MORTIMER , TREASURER	40 0	X						34,659	0	3,049
WILLIAM REHRIG , TRUSTEE	2 0	X						0	0	0
PAUL ROBINO , TRUSTEE	2 0	X						0	0	0
BILL SHUBIN , TRUSTEE	2 0	X						0	0	0
STEPHEN SNYDER , TRUSTEE	2 0	X						0	0	0
GREG MALFITANO , SVP FOR ADMINISTRATION	40 0			X				258,038	0	126,519
LAURIE LEVINE , VP FOR BUSINESS AND FINANCE	40 0			X				207,144	0	50,666
JASON WALTON , CHIEF OF STAFF	40 0			X				151,861	0	24,157
CHRISTIAN BONIFORTI , VP FOR INFORMATION AND SYSTEMS	40 0			X				135,983	0	22,176
Philip Riordan , VP FOR STUDENT LIFE	40 0			X				0	0	0
DELSIE PHILLIPS , VP FOR ENROLLMENT MANAGEMENT	40 0			X				131,769	0	0
JUDITH NELSON , VP FOR DEVELOPMENT	40 0				X			205,402	0	28,110
MARGARET RUDDY , GENERAL COUNSEL	40 0				X			191,281	0	56,456
CYNTHIA PATTERSON , VP FOR ACADEMIC AFFAIRS	40 0				X			185,245	0	21,360
MICHELE MORRIS , VP FOR MARKETING & COMMUNICATI	40 0				X			143,685	0	13,374
DIANE DICERBO , DIR PINE TREE/ACADEMIC ADVISOR	40 0					X		172,735	0	23,029
RUSSELL BOISJOLY , DEAN	40 0					X		167,876	0	21,050
RALPH NORCIO , ASSISTANT DEAN	40 0					X		165,884	0	16,762
MATTHEW CHALOUX , Dir Aux Services	40 0					X		148,100	0	23,303
MARSHA GLINES , DEAN	40 0					X		142,730	0	13,324
DONALD ROSS , PRESIDENT EMERITUS & TRUSTEE	40 0						X	133,545	0	17,428
JAMES HUNDRIESER , VP FOR STUDENT LIFE							X	130,765	0	11,704

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
a Student tuition and related fees	611,310	59,351,740	59,351,740		
b Residence-hall room and board fees	611,310	9,224,799	9,224,799		
c Bookstore sales	611,310	1,322,392	1,322,392		
d Camp fees	611,310	1,904,266	1,904,266		
e Student activity income	611,310	273,663	273,663		