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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

Inspection

A Fo	r the	2008 ca	alendar yea	r, or tax year beginning 07-0	1-2008 and ending 06-30-200	9		
B Ch	eck ıf a	pplicable	Please	C Name of organization FISK UNIVERSITY			D Employer id	lentification number
☐ Add	dress ch	nange	use IRS label or				62-02020	
∏ Na	me cha	nge	print or	Doing Business As			E Telephone n	lumber
┌ Init	al retu	rn	type. See Specific	Number and street (or P O box	if mail is not delivered to street addre	ss) Room/suite	(615) 329	
Г Теі	mınatıc	on	Instruc- tions.	1000 17TH AVENUE		,	G Gross receip	ots \$ 27,681,341
┌ Am	ended	return		City or town, state or country,	and ZIP + 4		1	
☐ Apr	olication	n pending		NASHVILLE, TN 37208				
		,	E Nan	l ne and address of Principal (Officer	l 11/->	<u>ا</u> ــــــــــــــــــــــــــــــــــــ	
				WILLIAMS	Tillet	H(a) Is th affilia	ıs a group retur ıtes?	n for
				7TH AVENUE				, 100 , 110
	v-even	npt status		/ILLE,TN 37208 (3) ◀ (insert no)	1/1) or		l affiliates includ	
		<u> </u>				1 -	lo," attach a lis ip Exemption N	t See instructions)
) W	eb sit	e:► WW	/W FISK ED	U		H(c) Grou	ip Exemption N	umber F
К Тур	e of org	ganızatıon	Corporat	on	er ▶ INSTITUTION	L Year of Fo	ermation 1867	1 State of legal domicile TN
		<u> </u>						
Pa	rt I		mary					
	1			e organization's mission or r	-			
န္			iiversity pro utions to sc	_	se backgrounds with the integrit	y and intelled	ct required for s	ubstantive
Governance				,,				
₹	2	Check	this box 🖵	ıf the organızatıon dıscontın	ued its operations or disposed o	f more than 2	5% of its asse	ts
ŝ	3	Numbe	r of voting r	nembers of the governing bo	dy (Part VI, line 1a)		3	26
ან აბ	4	Numbe	r of ındepen	dent voting members of the	governing body (Part VI, line 1t)	. 4	26
ĕ	5	Total n	umber of en	nployees (Part V , line 2a)			5	483
Activities &	6	Total n	umber of vo	lunteers (estimate if necess	ary)		6	6
ă	7a	Total g	ross unrela	ted business revenue from P	art VIII, line 12, column (C)		7a	0
	b	Net unr	elated busi	ness taxable income from Fo	orm 990-T, line 34		7b	
						Pric	or Year	Current Year
a.	8	Contri	butions and	grants (Part VIII, line 1h)			17,036,440	12,057,002
anue	9	Progra	am service	revenue (Part VIII, line 2g)			12,024,224	11,067,455
Reveni	10				nes 3, 4, and 7d)		412,334	126,366
-	11		•	art VIII, column (A), lines 5			4,626,123	4,430,518
	12	1 otal 1 12)	revenue—a	dd lines 8 through 11 (must	equal Part VIII, column (A), line	e	34,099,121	27,681,341
	13		and simila	ır amounts paıd (Part IX, col	umn (A), lines 1-3)		4,341,707	4,076,679
	14	Benefi	ts paid to o	r for members (Part IX, colu	mn (A), line 4)			0
	15	Saları	es, other co	mpensation, employee bene	fits (Part IX, column (A), lines 5	5-		
Expenses		10)					981,769	11,729,507
<u>₹</u>	16a			raising fees (Part IX, columi				0
<u>ਡ</u>	Ь			oenses, Part IX, column (D), line 2				
	17			Part IX, column (A), lines 1			25,875,069	12,445,307
	18				Il Part IX, line 25, column (A))		31,198,545	28,251,493
97	19	Reven	ue less exp	enses Subtract line 18 fror	n line 12	_	2,900,576	-570,152
Net Assets or Fund Balances							ing of Year	End of Year
15 cm	20	Total	assets (Par	t X, line 16)			113,023,855	109,844,401
주 문 문	21	Total	liabilities (F	art X, line 26)			19,819,896	18,788,852
žZ	22	Netas	sets or fun	d balances Subtract line 21	from line 20		93,203,959	91,055,549
Pai	rt II		ature Blo					
					ned this return, including accompanying of preparer (other than officer) is base			
Plea	se	***		,	,,	1	-05-17	··-· ···· · · · · · · · · · · · · · · ·
Sigr		Sign	ature of office	:r		Date		
Here	е	MAR	IE WILLIAMS	VP FOR FINANCE & ADMINISTRATI	ON			
			e or print nam					
		Preparer	0.70114			Check If	Preparer's PTIN	(See Gen Inst)
Paid		signatur	e P RICHA	RD M WINSTEAD		self- empolyed 🕨 🦵	• [
	arer's		ame (or yours	CROSSLIN & ASSOCIATES PC		•	ETNI &	
Use (Only		nployed), and ZIP + 4	2525 WEST END SUITE 1100			EIN Þ	
		"		NASHVILLE, TN 37203			Phone no 🕨 (615) 320-5500
May	the IR	S discus	s this retu		bove? (See instructions)			✓ Yes No

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

1 See A	Briefly describe the organization' additional Data Table	's mission				
2	Did the organization underta the prior Form 990 or 990-E		rogram services dur	ng the year whic	h were not listed on	Yes 🔽 No
	If "Yes," describe these new	services on Sched	ule O			
3	Did the organization cease of services?		significant changes i	n how it conduct	s any program	Yes ✓ No
	If "Yes," describe these cha	nges on Schedule C	ı			
4	Describe the exempt purpos Section 501(c)(3) and (4) o others, the total expenses, a	rganizations and 49	47(a)(1) trusts are r	equired to report		
4a		TUTE OF HIGHER EDUCA	17,809,780 including gi		4,076,679) (Revenue \$ RSHIPS AND VARIOUS SUPPORT SE	11,067,455) ERVICES IN ACHIEVING ITS
4b	(Code)(Expenses \$	including gra	ants of \$) (Revenue \$)
4c	(Code) (Expenses \$	ıncluding gra	ants of \$) (Revenue \$)
4d	Other program services (C		e O) g grants of\$)	(Revenue \$)
4e	Total program service expe	enses \$ 1	7,809,780 Must e	qual Part IX, Line	25, column (B).	

art IV	Checklist of	Required	Schedules
	CIICCRIISCOI	IXC Guil Cu	Scilcadics

			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		Νο
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 $\sqrt{2}$	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		Νο
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		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15		Νο
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		Νο
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		Νo
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		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
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		Νo
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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			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 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		No

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			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
		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		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "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? <i>If</i> "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		Νο
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

Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance	e				
					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	65			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments t	o ven	dors 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	483			
ь	If at least one is reported in 2a, did the organization file all required federal employr					
_	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this			2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more durin return?	g the	year covered by this	3a		No
h	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Sch	edule :		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a s			- 50		
	over, a financial account in a foreign country (such as a bank account, securities ac account)?			4a		Νο
ь	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Re Financial Accounts.	eport o	f Foreign Bank and			
5a	Was the organization a party to a prohibited tax shelter transaction at any time duri	ng the	tax year?	5a		Νο
ь	Did any taxable party notify the organization that it was or is a party to a prohibited	tax sh	nelter transaction?	5b		Νο
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exemp	t Entit	tv Reaardina Prohibited			
	Tax Shelter Transaction?			5с		
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 the were not tax deductible?	natsu •••	ch contributions or gifts	6b		
7	Organizations that may receive deductible contributions under section $170(c)$.					
а	Did the organization provide goods or services in exchange for any quid pro quo con more?	trıbut	ion of \$75 or	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services ${\sf p}$	rovide	d?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal prope		· ·	_		l <u>.</u> .
_	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	/ prem	nums on a personal			
	benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a pers	onal b	enefit contract?	7f		No
g	For all contributions of qualified intellectual property, did the organization file Form	8899	as required?	7g	Yes	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization f	ile a F	orm 1098-C as	7h	Yes	
8	required?	· ·	ction 509(a)(3)	/ '''	163	
	supporting organizations. Did the supporting organization, or a fund maintained by a sexcess business holdings at any time during the			8		
	year?		İ		<u> </u>	L
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		
Ь	Did the organization make a distribution to a donor, donor advisor, or related person	٠, د		9b		
10	Section 501(c)(7) organizations. Enter	1	I			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations Enter					
а	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	n lieu d	of Form 1041?	12a	<u> </u>	<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
	<i>,</i>		ı		I	I

Section A. Governing Body and Management

No

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

	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below	, desc	cribe the circumstanc	es,
	processes, or changes in Schedule O. See instructions.			
а	Enter the number of voting members of the governing body	1a		2

ь	Enter the number of voting members that are independent	1b		26		
	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		•	•	2	No
	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management con				3	No
•	Did the organization make any significant changes to its organizational documents s filed? $$.	ince t	he prior Forn	n 990 was	4	No
	Did the organization become aware during the year of a material diversion of the organization	anızatı	on's assets?	• •	5	Νo
	Does the organization have members or stockholders?				6	No
а	Does the organization have members, stockholders, or other persons who may elect governing body?				7a	No
b	Are any decisions of the governing body subject to approval by members, stockhold	ers, o	r other perso	ns?	7b	No
1	Did the organization contemporaneously document the meetings held or written action year by the following	ons ur	ndertaken du	rıng the		

	year by the following																				
а	the governing body?																				
b	each committee with	aut	hor	ity t	o a c	t or	ı be	hali	fof	the	gov	erni	ng b	ody	7						

	Does the organization have local chapters, branches, or affiliates?
)	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?

	•	•		_					
10	Was a copy of the Form	990 provided to the organization	's governing body before it	was filed? Al	lorg	anı	zatı	ions	3
	must describe in Sched	ule O the process, if any, the org	anization uses to review the	e Form 990					

	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	
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	L

	8a	Yes	
	8b	Yes	
	9a		No
	9b		
	10	Yes	
	11		Νο
_			

Section B. Policies

9a

			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			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
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 TN
- 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. I another's website.
- 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

MARIE WILLIAMS 1000 17TH AVENUE NASHVILLE,TN 37208 (615) 329-8604

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

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

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

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

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

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

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

Part VII Continued

		(C) Position (check all that apply)				all			(E)	(F)
(A) Name and Title	(B) A verage hours per week	Individual Trustee or Director	Institutional Trustee	Оппо	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
			-							
				\vdash			\vdash			
1b Total			•	<u></u>			-	1,177,115	5 (130,954

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►6

			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 I for such individual	,	V 0.5	
	, ,	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			
	ındıvıdual	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		Νo

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
NASHVILLE ELECTRIC COMPANY 1214 CHURCH STREET NASHVILLE, TN 37246	ELECTRIC SERVICE	843,323
HONEYWELL INC 12490 COLLECTION CENTER DRIVE CHICAGO, IL 60693	HVAC MAINTENANCE	401,744
THOMPSON HOSPITALITY 505 HUNTMAR PARK DRIVE HERNDON, VA 20170	FOOD/DINING SERVICES	1,053,027
CGLIC 5089 COLLECTION CENTER DRIVE CHICAGO, IL 60693	INSURANCE-GUARDIAN	862,545
VANDERBILT UNIVERSITY 1110 19th AVENUE SOUTH NASHVILLE, TN 37212	BUSINESS SERVICES	365,348
Total number of independent contractors (including those in 1) who refrom the organization	. ,	30

Statement of Revenue

				(A) Total Revenue	(B) Related or Exempt Function	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC
					Revenue	Revenue	512, 513, or 514
so co	1a	Federated campaigns 1a					
aut	ь	Membership dues					
s, gr amo	с	Fundraising events					
類	d	Related organizations1d					
	e	Government grants (contributions) 1e	6,774,067				
Contributions, gifts, grants and other similar amounts	f	All other contributions, gifts, grants, and similar amounts not included above	5,282,935		İ		
e fi	g	1f Noncash contributions included in					
S E	h	lines 1a-1f \$ Total (Add lines 1a-1f)		12,057,002			
			Business Code				
ППе	2a	TUITION AND FEES		11,067,455	11,067,455		
e ve	ь						
e H	С						
¥	d						
Ã.	e						
Program Serwce Revenue	f	All other program service revenue					
Š	g	Total. Add lines 2a-2f					
	3	Investment income (including divid	ends, interest				
		other similar amounts)		126,366			126,366
	4	Income from investment of tax-exempt bo	nd proceeds	0			
	5	Royalties	•	0			
		(ı) Real	(II) Personal				
	6a	Gross Rents	(, , , , , , , , , , , , , , , , , , ,				
	b	Less rental					
	c	expenses Rental income					
	d	or (loss) Net rental income or (loss)					
			<u> </u>				
	7a	(1) Securities Gross amount	(II) O ther				
	/a	from sales of assets other					
	ь	than inventory Less cost or					
		other basis and sales expenses					
	С	Gain or (loss)					
	d	Net gain or (loss)	▶	0			
	8a	Gross income from fundraising events (not including					
Φ		\$ of contributions reported on line					
듄		1c) See Part IV, line 18					
ě		Attach Schedule G If total exceeds \$15,000					
F.	ь	Less direct expenses b					
Other Revenue	c	Net income or (loss) from fundraising	na events	0			
0	9a		<u> </u>				
	Ja	Gross income from gaming activities See part IV, line 19					
		Complete Schedule G ıf total exceeds \$15,000					
		a					
	ь	Less direct expensesb					
	С	Net income or (loss) from gaming a	ctivities	0			
	102	Gross sales of inventory, less	•				
	100	returns and allowances .					
		а					
	ь	Less cost of goods sold b					
	С	Net income or (loss) from sales of i		0			
	4.4	Miscellaneous Revenue	Business Code	590,969			590,969
	11a	OTHER INCOME		3,839,549			3,839,549
	Ь	AUXILIARY ENTERPRISES		3,039,549			3,039,549
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d	 \$ 4,430,518				
	12	Total Revenue. Add lines 1h, 2g, 3,		27,681,341	11,067,455		4,556,884
		8c,	· · · · · · · · · · · · · · · · · · ·				

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re	anizations mu equired to com	ust complete plete columns	all columns. (B), (C), and (D)) <u>.</u>
Do r	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0	·		<u>.</u>
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	4,076,679	4,076,679		
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	924,496	253,873	670,623	
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	8,881,606	5,603,996		515,829
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0			
9	Other employee benefits	1,923,405	1,593,890	185,938	143,577
10	Payroll taxes	0			
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	399,277	21,702	377,575	
c	Accounting	199,380	1,554	197,826	
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	93,203		93,203	
g	Other	0			
12	Advertising and promotion	12,372	1,967	10,055	350
13	Office expenses	593,620	390,451	177,798	25,371
14	Information technology	67,267	18,355	20,039	28,873
15	Royalties	0			
16	Occupancy	1,171,241	1,082,693	84,688	3,860
17	Travel	510,158	220,023	274,875	15,260
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0			
19	Conferences, conventions and meetings	44,606	7,059	24,907	12,640
20	Interest	629,273	581,699	45,500	2,074
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	2,922,212		2,922,212	
23	Insurance	374,655		374,655	
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	REPAIRS AND MAINTENANCE	1,350,048	1,247,981	97,617	4,450
ь	FOOD SERVICES	1,110,171	1,026,240	80,272	3,659
c	CONTRACT SERVICES	688,878	636,797	49,810	2,271
d	STIPENDS	524,297	523,594	703	
e	CONSULTING	367,500	165,262	168,224	34,014
f	All other expenses	1,387,149	355,965	997,678	33,506
25	Total functional expenses. Add lines 1 through 24f	28,251,493	17,809,780	9,615,979	825,734
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	
	1	Cash—non-interest-bearing	_			4,483,910	1		2,625,386
	2	Savings and temporary cash investments				, ,	2		
	3	Pledges and grants receivable, net					3		
	4	Accounts receivable, net				4,949,242	4	1	6,231,788
	5	Receivables from current and former officers, directors, trustee other related parties Complete Part II of Schedule L	s, key		es or		5		
	6	Receivables from other disqualified persons (as defined under s persons described in section 4958(c)(3)(B) Complete Part II of			6				
	7	Notes and loans receivable, net				275,560	7		393,851
	8	Inventories for sale or use					8		
20	9	Prepaid expenses and deferred charges				575,780	9		695,162
Assets	10a	Land, buildings, and equipment cost basis	10a	I	74,692,957				
•	ь	Less accumulated depreciation Complete Part VI of				07.000.400		•	
	l	Schedule D	10b	1	47,799,061	27,360,480			6,893,896
	11	Investments—publicly traded securities				7,177,388	11	•	4,802,823
	12	Investments—other securities See Part IV, line 11 Complete F Schedule D					12		
	13	Investments—program-related See Part IV, line 11 $\it Complete B$ of Schedule D .		68,201,495	13	6	8,201,495		
	14	Intangible assets			14				
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D					15		
	16	Total assets. Add lines 1 through 15 (must equal line 34)				113,023,855	16	10	9,844,401
	17	Accounts payable and accrued expenses .				3,807,034	17	:	3,841,737
	18	Grants payable			18				
	19	Deferred revenue		1,538,724	19		1,126,522		
	20	Tax-exempt bond liabilities		9,294,519	20		8,729,519		
<u>ē</u>	21	Escrow account liability Complete Part IV of Schedule D		•			21		
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified							
ä		persons Complete Part II of Schedule L					22		
	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				5,179,619	25	:	5,091,074
	26	Total liabilities. Add lines 17 through 25				19,819,896	26	1.	8,788,852
ės –		Organizations that follow SFAS 117, check here F and compethrough 29, and lines 33 and 34.	olete l	ines 27					
ant	27	Unrestricted net assets				78,279,779	27	7:	5,481,850
Balance	28	Temporarily restricted net assets				3,192,205	28	:	3,648,197
귤	29	Permanently restricted net assets				11,731,975	29	1	1,925,502
r Fund		Organizations that do not follow SFAS 117, check here ► ☐ are lines 30 through 34.							
S O.	30	Capital stock or trust principal, or current funds					30		
Ą.	31	Paid-in or capital surplus, or land, building or equipment fund					31		
Assets	32	Retained earnings, endowment, accumulated income, or other fu		•			32		
Net ,	33	Total net assets or fund balances		93,203,959	33	9	1,055,549		
<i>Ž</i>	34	Total liabilities and net assets/fund balances				113,023,855	34		9,844,401
		Financial Chalamanta and Burni							
Pā	rt XI	Financial Statements and Reporting						Yes	No

Dart VI	Einancial	Statements	and D	oporting
7. 1 4 2 . 1 2	FINANCIAL	Statements	ann R	emmetiliki.

1	Accounting method used to prepare the Form 990			
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	

Employer identification number

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Open to Public Inspection

-15K (JNIVEK:	SITY						62	-020200	n	
Pa	rt I	Reason	for Public C	harity Status (to be co	mpleted	by all or	ganızatıo				
				ation because it is (Please							
1	Γ	A church, c	onvention of ch	nurches, or association of ch	urches de	scribed in	Section 1	170(b)(1)	(A)(i).		
2	<u> </u>	A school de	escribed in Sec t	tion 170(b)(1)(A)(ii). (Attac	h Schedu	ıle E)					
3	Г	A hospital	or a cooperativ	e hospital service organizati	on descril	bed in Sec	tion 170(l	b)(1)(A)(i	i ii). (Attac	h Schedul	e H)
4	Γ	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	Γ	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	Γ	A federal, s	tate, or local g	overnment or governmental	unıt descr	ıbed ın Se	ection 170	(b)(1)(A)	(v).		
7	Γ	An organiz	ation that norm	ally receives a substantial p	art of its s	support fro	om a gove	rnmental ı	ınıt or fron	n the gene	ral public
		described i	n Sect ion 170(l	o)(1)(A)(vi) (Complete Par	tII)						
8	Γ	A commun	ity trust describ	oed in Section 170(b)(1)(A)	(vi) (Com	nplete Par	tII)				
9	Г	An organiza	ation that norm	ally receives (1) more than	331/3% 0	fits supp	ort from c	ontributior	ns, membe	ership fees	, and gross
		receipts fro	om activities re	lated to its exempt functions	—subject	to certair	n exceptio	ns, and (2) no more	than 331/	3% of
		ıts support	from gross inve	estment income and unrelate	ed busines	ss taxable	ıncome (l	ess sectio	on 511 ta:	x) from bus	sinesses
	_	acquired by	the organization	on after June 30, 1975 See	Section 5	09(a)(2).	(Complet	e Part III)		
10				and operated exclusively to							
11	Г	_	=	and operated exclusively fo					•	•	• •
				orted organizations describe type of supporting organiza						Section 5	09(a)(3). Check
		_	ype I b			•	nally Integ	_	'' d	Гтуре	III - Other
e	Γ	By checkin	g this box, I ce	rtify that the organization is	not contro	olled direc	tly or ındı	rectly by o	one or mo	re disquali	fied persons
		other than	foundation man	agers and other than one or	more publ	licly suppo	orted orga	nızatıons (described	ın section	509(a)(1) or
		section 50		d	+b - IDC		- T T	T II .			
f		check this		d a written determination fro	in the IRS	S that it is	a Type I,	Type II o	riypeiii	supportin	ig organization,
g				as the organization accepted	d any gift	or contrib	utıon from	any of the	<u></u>		,
		following pe									
			· ·	r indirectly controls, either a		_	th persons	describe	d in (ii)		Yes No
				ng body of the the supported	_	tion?				11g(
		. ,	•	erson described in (i) above						11g(
				ty of a person described in (11g(iii) No
h		Provide the	tollowing infori	mation about the organizatio	ns the org	janization	supports				
	(i) N	ame of	(ii) EIN	(iii) Type of organization	/iv) ī	s the	(v) Did s	ou notify	(vi) 1	s the	(vii) A mount of
		orted	(11) LIN	(described on lines 1-9		ation in	1	nization		ation in	support?
		nızatıon		above or IRC section	_	listed in	ın col (i	i) of your		rganızed	
				(See Instructions))		verning	supp	oort?	ın the	US?	
						ment?	1.7		100		
					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.)

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

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

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

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

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

Schedule A (Form 990 or 990-EZ) 2008

▶□

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

Schedule A (Form 990 or 990-EZ) 2008

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

▶ 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.

Supplemental Financial Statements

Open to Public

еша	Revenue Service			Inspection
	me of the organization (UNIVERSITY		Employer identifica	tion number
110	· ONLY ENGLY		62-0202000	
Pa	organizations Maintaining Donor Acorganization answered "Yes" to Form 99		unds or Accounts	. Complete if the
		(a) Donor advised funds	(b) Funds and o	ther accounts
L	Total number at end of year			
2	Aggregate Contributions to (during year)			
3	Aggregate Grants from (during year)			
ļ	Aggregate value at end of year			
•	Did the organization inform all donors and donor advi funds are the organization's property, subject to the	<u> </u>	noradvised	┌ Yes
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben impermissible private benefit?		•	┌ Yes
Pai	t II Conservation Easements. Complete	ıf the organization answered "Yes" t	o Form 990, Part IV	/, line 7.
L	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space	on or pleasure) Preservation of an Preservation of ce	n historically important ertified historic structu	re
	Complete lines 2a-2d if the organization held a quali on the last day of the tax year	ified conservation contribution in the form		ement the End of the Yea
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easement	c.s	2b	
c	Number of conservation easements on a certified hi		2c	
d	Number of conservation easements included in (c) a	` ,	2d	
	Number of conservation easements modified, transfe	•	d by the organization	durina
	the taxable year	and the second s	ou by the organization	u a i i i i j
ļ	Number of states where property subject to conserva	ation easement is located ►		
i	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	=	ations, and	┌ Yes ┌ No
•	Staff or volunteer hours devoted to monitoring, inspe	ecting and enforcing easements during the	year 🟲	
•	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing easements during the ye	ear 🟲 \$	
3	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	2 (d) above satisfy the requirements of sec	ction	┌ Yes ┌ No
)	In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easen	the footnote to the organization's financia		
'a r	Complete of the organization answered		or Other Similar	Assets.
a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	ch in furtherance of pu	
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research i		•
	(i) Revenues included in Form 990, Part VIII, line 1		► \$	
	(ii) Assets included in Form 990, Part X		- \$	68,201,495
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA		- +	de the
а	Revenues included in Form 990, Part VIII, line 1		- \$	
b	Assets included in Form 990, Part X		► \$	
	meraded in rollingsoft all A		- Ψ	

'ar	(1944) Organizations Maintaining Collection	is of Art, I	Histori	cal Tr	<u>easu</u>	ires, or Oth	<u>er Similar</u>	Asse	ets (co	ntınued)
3	Using the organization's accession and other records, items (check all that apply)	check any c	of the fol	owing t	hat ar	e a sıgnıfıcant	use of its coll	lectioi	n	
а	▼ Public exhibition		d 🔽	Loan	rexc	hange program	s			
b	Scholarly research		e 🔽	Other	EDU	CATIONALO	UTREACH PR	OGR	AMS	
С	▼ Preservation for future generations									
4	Provide a description of the organization's collections Part XIV	and explain	how the	/ furthe	r the o	organization's e	exempt purpo	se in		
5	During the year, did the organization solicit or receive assets to be sold to raise funds rather than to be mair		,				mılar	Г	Yes	√ No
Pai	rt IV Trust, Escrow and Custodial Arrange					ınızatıon ans	wered "Yes"	to Fo	orm 9	90,
	Part IV, line 9, or reported an amount on									
1a	Is the organization an agent, trustee, custodian or oth included on Form 990, Part X?	ier intermedi	ary for c	ontribut	ions	or other assets	not	Γ	Yes	┌ No
b	If "Yes," explain why in Part XIV and complete the fol	lowing table								
								A mou	ınt	
С	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 2	217					Γ	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV									
Pa	rt V Endowment Funds. Complete if the org								\\	
	Beginning of year balance (a)Curr	12,431,114	(b)Prior	Year	(c) IV	vo Years Back (1) Three Years Ba	ick (e)Four Ye	ears Back
la b	Contributions	393,527								
c	Investment earnings or losses	-364,075								
d	Grants or scholarships	118,825								
e	Other expenditures for facilities	200,000								
_	and programs									
f	Administrative expenses									
g	End of year balance	12,141,741								
2	Provide the estimated percentage of the year end bala	nce held as								
а	Board designated or quasi-endowment 🕨 0 %									
b	Permanent endowment 🕨 98 219 %									
c	Term endowment ► 0 %									
За	Are there endowment funds not in the possession of the	ne organizati	on that a	re held	and a	idministered fo	r the			
	organization by (i) unrelated organizations						Γ	3a(i)	Yes	No No
	(ii) related organizations		• •	•	•		_	3a(ii)		No
b	If "Yes" to 3a(II), are the related organizations listed a				٠		· · · · · · · · · · · · · · · · · · ·	3b	<u> </u>	
1	Describe in Part XIV the intended uses of the organize	ation's endo	wment fu	nds						
Pai	rt VI Investments—Land, Buildings, and E	quipment	. See F	orm 99	90, Pa	art X, line 10				
	Description of investment			Cost or c s (investr		(b) Cost or other basis (other)	(c) Deprecia	tion	(d) Bo	ok value
La	Land			12	3,350	1,084,19	0	$\neg \uparrow$		1,207,540
b	Buildings				0	47,595,05	9 25,884	1,184		1,710,875
c	Leasehold improvements		.		0		0	0		(
d	Equipment		.		0	21,168,28	1 18,666	5,516		2,501,765
e	Other				0	4,722,07	7 3,248	3,361		1,473,716

26,893,896

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12.	
(a) Description of security or cateory (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		Cost of end-of-year market value
Closely-held equity interests		
Other		
otal. (Column (b) should equal Form 990, Part X, col (B) line 12)		
art VIII Investments—Program Related. Se	e 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
NVESTMENTS IN ART COLLECTION	68,201,495	
	,,	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	68,201,495	
Part IX Other Assets. See Form 990, Part X, II (a) Descri		(b) Book value
. ,	•	
Tabal (Calumer (b) abouted actual Forms 2000 Part V and (D) line	15.)	
Part X Other Liabilities. See Form 990, Part X, col.(B) line		
(a) Description of Liability	(b) A mount	
ederal Income Taxes		
EPOSITS HELD IN CUSTODY	66,265	
DV FROM FED GOVT FOR PERKIN	323,721	
ANK LINE OF CREDIT	4,488,779	
APITAL LEASE OBLIGATION	212,309	
[Stal (Column (h) should agual Form 000, Part V, cal (P) line 25.)	F. C.	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) 🕨	5,091,074	

Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	27,681,34
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	28,251,493
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-570,152
4	Net unrealized gains (losses) on investments	4	-1,578,258
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-1,578,258
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-2,148,410
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
1	Total revenue, gains, and other support per audited financial	_	22,026,404
_	statements	1	
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
a L	Net unrealized gains on investments		
b	 		
c d	Recoveries of prior year grants		
u e	Add lines 2a through 2d	2e	-5,654,93
3	Subtract line 2e from line 1	3	27,681,34
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		27,001,54.
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	27,681,34:
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses	per R	
1	Total expenses and losses per audited financial statements	1	24,174,814
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments]	
c	Losses reported on Form 990, Part IX, line 25 2c]	
d	Other (Describe in Part XIV) 2d] [
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	24,174,814
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	4,076,679
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	28,251,493

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

Ident if ier	Return Reference	Explanation
SCHEDULE D PART III	LINE 4	Fisk University Galleries provides a welcoming environment and fosters an appreciation and understanding of art through exhibitions, classroom instruction, educational programs, and research The Fisk art collection consists of more than 4000 works of art - paintings, prints, drawings, sculptures, photographs, historical artifacts and other objects - from cultures across the globe Major collections include the Alfred Stiegltiz Collection of Modern Art, The Harmon Foundation Collection of African American Art, The Liff Family Collection of African Art, and The Winold Reiss Portrait Collection among many others. Works from the collection are exhibited regularly in permanent and temporary exhibitions at the university's Aaron Douglas and Carl Van Vechten galleries. They are also occasionally loaned for temporary exhibition at accredited museums across the United States. The galleries also seek to raise awareness and support an appreciation of art through the continued acquisition and preservation of works of art received as donations to Fisk University Galleries. The collections and any benefits from the art will be used for the mission of the University
SCHEDULE D PART V	LINE 4	The Universitys endowment consists of individual donor restricted funds established for a variety of purposes. As required by GAAP, net assets associated with endowment funds are classified and reported based on the existence or absence or donor-imposed restrictions. The University classifies as permanently restricted net assets (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent gifts to the permanent endowment, and (c) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund that is not classified in permanently restricted net assets is classified as temporarily restricted net assets until those amounts are appropriated for expenditure by the University in a manner consistent with the standard of prudence prescribed by applicable state laws
SCHEDULE D PART XII	LINE 2D	\$(4,076,679) SCHOLARSHIP EXPENSE SHOWN ON BOOKS AS REVENUE OFFSET REPORTED ON THE TAX RETURN AS AN EXPENSE
SCHEDULE D PART XIII	LINE 4B	\$4,076,679 SCHOLARSHIP EXPENSE SHOWN ON BOOKS AS REVENUE OFFSET REPORTED ON THE TAX RETURN AS AN EXPENSE

OMB No 1545-0047

2008

Open to Public

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service 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.

Schools

Name of the organization **Employer identification number** FISK UNIVERSITY 62-0202000 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? Yes 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 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 Yes THE COLLEGE'S NONDISCRIMINATORY POLICY IS PRINTED IN THE "EMPLOYEE POLICIES AND PROCEDURES" MANUAL AS WELL AS THE STUDENT HANDBOOK 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 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 4d d Copies of all material used by the organization or on its behalf to solicit contributions? Yes If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? 5c Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo h Other extracurricular activities? 5h Νo 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? **b** Has the organization's right to such aid ever been revoked or suspended?

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

6a

6b

Yes

Νo

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DLN: 93493137039940

OMB No 1545-0047

2008

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Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the U.S.

Department of the Treasury Internal Revenue Service Name of the organization

FISK UNIVERSITY

Schedule I

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

Inspect ion Employer identification number

62-0202000

Part I General Infor	mation on Gra	nts and Assistance	1				
Does the organization m the selection criteria useDescribe in Part IV the organization	ed to award the gra	nts or assistance?					⊢ Yes
Part II Grants and Ot Form 990, Part Part IV and Sch	IV, line 21 for ar nedule I-1 if addi	ny recipient that rece	erved more than \$5,0		tes. Complete if the of the no one recipient rec	ceived more than \$5,0	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
2 Enter total number of seconganizations							
3 Enter total number of oth	ner organizations .						·
For Paperwork Reduction Act No	tice, see the Instruct	tions for Form 990.		Cat No 50055	P	Scl	nedule I (Form 990) 2008

Schedule I	(Form 990) 2008	
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part	IV, line 22
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
SCHOLARSHIPS & FELLOWSHIPS FOR STUDENTS ATTENDING	505	4,076,679	0	N/A	N/A

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

See Additional Data	таріе	
Ident if ier	Return Reference	Explanation
SCHEDULE I	PART I LINE 2	The Office of Sponsored Prorgrams is responsible for ensuring that auditable records are maintained in suppport of all direct and indirect charges to grants, contracts, or agreements. The Principal Investigator initially approves all expenditures of a sponsored project and is responsible for determining whether the sponsor will allow an item of direct cost, before the expenditure is processed. In addition, these expenditures are also closely reviewed and monitored by the Office of Sponsored Programs before the expenditure requisition is approved for payment to ensure that the grant funds are properly utilized for the purposes specified in the grant contract/agreeement.

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DLN: 93493137039940

OMB No 1545-0047

Schedule 1

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

Compensated Employees

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

For certain Officers, Directors, Trustees, Key Employees, and Highest

2008

Open to Public Inspection

Name of the organization FISK UNIVERSITY

Employer identification number

62-0202000

Pa	rt I Questions Regarding Compensation	on				
					Yes	Νo
1a	Check the appropiate box(es) if the organization pr 990, Part VII, Section A, line 1a Complete Part II		iny of the following to or for a person listed in Form vide any relevant information regarding these items			
	First class or charter travel	<u> </u>	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a v provision of all the expenses described above? If "			1b	Yes	
2	Did the organization require substantiation prior to					
	officers, directors, trustees, and the CEO/Executiv	ve Direct	or, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the organizat organization's CEO/Executive Director Check all t	that appl	ly			
	Compensation committee	<u> </u>	Written employment contract			
	Independent compensation consultant	고	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 VI	I, Section A, line 1a			
а	Receive a severance payment or change of control	l paymen	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ental nor	nqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-l	based co	ompensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	orovide th	he applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must c	omplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"	•	, ,	7		No
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described 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	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	Deficits	(8)(1)-(8)	990 or Form 990-EZ
KOFI LOMOTEY	(I)	110,724 0	0	0	4,593 0	15,178 0	130,495	0 0
HAZEL O'LEARY	(I) (II)	242,723 0	0	0	0	34,448 0	277,171 0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

Ident if ier	Return Reference	Explanation
-		
	·	

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

2008

Open to Public Inspection

Name of the organization FISK UNIVERSITY

Employer identification number

62-0202000

ldentifier	Return Reference	Explanation
990 PART VI		A COPY OF THE FORM 990 WAS DISTRIBUTED TO THE BOARD AND THE AUDIT COMMITTEE A FULL REVIEW OF THE RETURN WAS CONDUCTED AT A BOARD MEETING HELD ON MAY 14, 2010

ldentifier	Return Reference	Explanation
990 PART VI	SECTION B LINE 12C	The Fisk University ("Fisk" or the "University") Board of Trustees (the "Board") has adopted a Conflict of Interest Policy (the "Policy") that is currently in effect. The Policy establishes a procedure for trustees to disclose conflicts or potential conflicts of interest as they arise. The Policy also creates a procedure whereby the individual facts of each situation can be assessed in relation to the best interests of the University and an informed, unbiased decision can be made with regard to whether a particular conflict is permissible or impermissible under the Policy. The Policy requires each trustee to submit an Annual Conflict of Interest Disclosure Statement at least annually to the Board Secretary. New trustees are required to submit the Annual Conflict of Interest Disclosure Statements upon accepting service on the Board and in no event later than his or her first Board/Board Committee meeting. The University endeavors to ensure strict compliance with this Policy. To achieve this goal, the University's General Counsel provides a tutorial on conflicts issues, review is the University's Bylaws regarding conflicts, and reviews the terms of the Policy, including reporting requirements. Also, at the beginning of each annual meeting of the Board, the Board members are reminded by the Board's Chairman, the University's President and the University's General Counsel about conflict reporting requirements, and, the Board members are required to submit an Annual Conflict of Interest Disclosure Statement prior to the adjournment of the meeting. Following the meeting, the University's General Counsel checks each Annual Conflict of Interest Disclosure Statement promany trustee who did not attend the annual meeting of the Board or who did not return the form at the adjournment of that meeting Additionally, the University's Bylaws specify the President or his or her designee(s) as the only University official(s) authorized to enter into a binding agreement on behalf of the University By limiting signatory authority t

ldentifier	Return Reference	Explanation
990 PART VI	SECTION B LINE 15B	Governance and Administration CEO evaluation/selection The governing board of the institution is responsible for the selection and the periodic evaluation of the chief executive officer. The Fisk Board of Trustees employs search firms that specialize in the placement of senior administrative personnel at institutions of higher education. The search firm then manages the entire recruitment process, including job search postings, screenings of applicants and their credentials as well as the coordination of candidate interviews with selected members from the Fisk Board of Trustees. Such searches are conducted on a 'highly confidential' basis and do not involve the Office of Human Resources until such time as the Board of Trustees selects and announces the presidential candidate. In addition, the Board of Trustees, uses its legal counsel to formulate and/or review all presidential contracts for the University Article V, Section 1 of Fisk University's ("Fisk" or the "University") Amended and Restated Bylaws (the "Bylaws") confers to its Board of Trustees (the "Board") the authority to appoint the President, who serves as the University's Chief Executive Officer Specifically, Article V, Section 1 of the Bylaw s states that the Board is responsible for the Board is charged with responsibility of evaluating the President's performance and setting his or her compensation. Under this provision of the Bylaws, the Executive Committee is comprised of the Board Chairman, Vice-Chairman, the Secretary of the Board, the Chairpersons of each of the Board's Standing Committees, and the President The Executive Committee to develop, implement and evaluate the President. The Executive Committee to develop, implement and evaluate the President's performance management program, compensation, and conditions of employment. The employment agreement between the University and the University's current President is osets forth a process for the President's performance review of the President The date(s) and frequency of such performance rev

ldentifier	Return Reference	Explanation
990 PART VI	SECTION C LINE 19	FISK UNIVERSITY HAS COPIES OF ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ON FILE TO BE MADE AVAILABLE TO THE PUBLIC UPON REQUEST

Software ID: Software Version:

EIN: 62-0202000

Name: FISK UNIVERSITY

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa											
		Posit t	(C tion (hat a	chec		I			(E)	(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Prector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
HAZEL O'LEARY, PRESIDENT	40 0	Х		Х	Х	Х		242,723	0	34,448	
ALMA BROWN , TRUSTEE	1 0	Х						0	0	0	
MIKE CURB , TRUSTEE	1 0	Х						0	0	0	
EDDIE HAMILTON, TRUSTEE	1 0	Х						0	0	0	
ROBERT HANFLING , TRUSTEE	1 0	Х						0	0	0	
KASE LAWAL , TRUSTEE	1 0	Х						0	0	0	
ROBERT MALLETT , TRUSTEE	1 0	Х						0	0	0	
LEATRICE MCKISSACK , TRUSTEE	1 0	Х						0	0	0	
JOAN MOBLEY , TRUSTEE	1 0	Х						0	0	0	
PATRICIA MEADOWS , TRUSTEE	1 0	Х						0	0	0	
GREGG MORTON, TRUSTEE	1 0	Х						0	0	0	
SHEILA PETERS , TRUSTEE	1 0	Х						0	0	0	
DONNA RICE, TRUSTEE	1 0	Х						0	0	0	
WILLIS SHEFTALL , TRUSTEE	1 0	Х						0	0	0	
PERIAN STRANG , TRUSTEE	1 0	Х						0	0	0	
MICHAEL WOODHOUSE , TRUSTEE	1 0	Х						0	0	0	
WARREN COLLINS , TRUSTEE AND PROFESSOR	40 0	Х				Х		133,656	0	8,998	
THE HONORABLE LESLIE MEEK , TRUSTEE	1 0	Х						0	0	0	
EDDIE GEORGE , TRUSTEE	1 0	Х						0	0	0	
HOWARD GENTRY JR , TRUSTEE	1 0	Х						0	0	0	
CHERYL DANIEL , TRUSTEE	1 0	Х						0	0	0	
LINDA COLEMAN , TRUSTEE	1 0	Х						0	0	0	
BARBARA BOWLES , TRUSTEE	1 0	Х						0	0	0	
P ANDREW PATTERSON , TRUSTEE	1 0	Х						0	0	0	
ROBERT NORTON , TRUSTEE	10	Х						0	0	0	
MARIE WILLIAMS , VP & CHIEF ADMIN OFFICER	40 0			х	x	х		129,273	0	9,677	
KEN WEST , VP OF COMMUNICATION/PR	40 0			х	х			89,687	0	13,109	
BARBARA MURRELL , VP OF STUDENT LIFE	40 0			Х	х			76,420	0	240	
PATRICK LIVERPOOL , INTERIM PROVOST	40 0			х	х			85,160	0	14,165	
SPENCE MANERS , VP FOR FINANCE/CFO	40 0			Х	x	х		102,743	0	8,191	

Form 990, Part VII - Section Aaa

		(C) Position (check all that apply)							(5)	(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
DEBORAH FAY , VP FOR INSTITUTIONAL ADVANCEME	40 0			x	х	×		87,766	0	6,925	
ARNOLD BURGER , PROFESSOR	40 0					Х		118,963	0	15,430	
KOFI LOMOTEY , PROVOST	40 0						Х	110,724	0	19,771	

Form 990, Part III, Line 1 - Briefly describe the organization's mission:

Fisk University produces graduates from diverse backgrounds with the integrity and intellect required for substantive contributions to society. Our curriculum is grounded in the liberal arts. Our faculty and administrators emphasize the discovery and advancement of knowledge through research in the natural and social sciences, business and the humanities. We are committed to the success of scholars and leaders with global perspective. The D.E.T.A.I.L.S. represents Fisk's core values. Our values reflect our overall ethical and moral engagement. We, the FISK Family, seek to internalize these principles and apply them in our day-to-day work and in our lives. Diversity We believe that our individual differences are a collective strength. We will support and encourage diversity of opinion, of culture and aids us in building a collective wisdom that results in more powerful and relevant solutions to our challenges. Excellence We believe that excellence is the result of a lifelong pursuit of