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SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047

Open to Public Inspection

		of the Treasury venue Service	► A	ttach to Form 990 or Fo							Inspection
		he organization							Employe	r identifica	tion number
UN	IVER		FOUNDATION						80		1484026
Pa	rt i	Reason	for Public Ch	arity Status (All or	ganizatio	ons mus	t compl	ete this	part.) Se	e instru	ctions.
The	he organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)										
1				rches, or association			ribed in s	ection 1	70(b)(1)(4) (i).	
2		A school de	scribed in sectio	on 170(b)(1)(A)(ii). (Att	tach Sch	edule E.)					
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4	П	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		-	tion operated for (b)(1)(A)(iv). (Co	the benefit of a colle mplete Part II.)	ge or uni	iversity ov	vned or a	perated	by a gov	ernmenta	I unit described in
6				ernment or governme							
7				/ receives a substantion (1)(A)(vi). (Complete F		its suppo	ort fròm a	governm	nental uni	t or from	the general public
8		A community	y trust described	d in section 170(b)(1)	(A)(vi). (C	Complete	Part II.)				
9	_Ø			receives: (1) more th							
-4	<i></i> -	•		d-to-its-exempt-fune		•					
••				ent income and unre after June 30, 1975.						i Sii tax) trom busines <u>ses</u>
10	$\overline{\Box}$	-		nd operated exclusive	-		-				
11				and operated exclusiv							
	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		• 1		oe III-Fun	•	_			Type III-Other
е				tify that the organizat							
				n managers and othe	r than on	e or more	publicly	supporte	d organi	zations de	escribed in section
		• • • •	section 509(a)(2)								
f			•	a written determinate	ion from	the IRS	that it is	a Type	I, Type II	i, or Type	elli supporting
_		•	, check this box								L
8	ı	following pe		the organization acce	epted any	y gitt or c	Ontributio	on Irom a	iny or the	.	
		• .		r indirectly controls, (oithar alc	ne or too	ether wi	th nersor	ne descri	hed in (ii)	Yes No
				ning body of the sup							11g(i)
		• •	=	erson described in (i)	•						11g(ii)
				of a person described							11g(iii)
h	1	Provide the	following inform	ation about the suppo	orted org	anization	(s).		, <u> </u>		
(i)		e of supported ganization	(ii) EIN	(iii) Type of organization		organization		ou notify		is the	(vil) Amount of support
	OIZ	Rainsanon		(described on lines 1-9 above or IRC section	governing document? col. [col. (i)	of your	(i) organ	lion in col. ized in the	- Support
			ļ	(see instructions))	<u> </u>	T		port?	 	S.?	
					Yes	No	Yes	No	Yes	No	-
		<u> </u>									
		·	 		 	 		 	 		
			 		ļ	ļ		-			
Tot	al						;	`		,	

	Support Schedule for Org (Complete only if you chec	janizations l ked the box	Described in on line 5, 7,	Sections 170 or 8 of Part I.	0(b)(1)(A)(iv))	and 170(b)(1)(A)(vi)			
Sec	tion A. Public Support									
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 lines 1 through 3		 							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount				, ,					
6	shown on line 11, column (f)	ļ								
	tion B. Total Support	\	J			· 				
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	· · (c) 2007	(d), 2008	(e) 2009 .	(f) Total			
	Amounts from line 4			mari di vanatan	स्त्रीकेश्वर्यका कर्ने हेर	1923. A 2-22 P.	in Linds Trapes			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		-		<u> </u>	-				
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.	c. (see instructi	ons) , , .			12				
13	areas records from related delivines, and food manuallers									
Sec	tion C. Computation of Public Su					T				
14	Public support percentage for 2009 (line	6, column (f) d	livided by line 1	1, column (f))		14	%_			
15	Public support percentage from 2008 Sc	•	=			15				
16a	33%% support test-2009. If the organ									
	and stop here. The organization qualifies as a publicly supported organization									
þ	33¼ % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33½ % or more, check this box and stop here. The organization qualifies as a publicly supported organization									
17a	10%-facts-and-circumstances test—2009. 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.									
	10%-facts-and-circumstances test—2008. 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	a not check a b	ox on line 13, 16	a, 16b, 17a, or 1	i /b, check this	box and see ins	structions > 🔲			

Par	Support Schedule for Orga (Complete only if you checked)	nizations De ed the box or	escribed in S n line 9 of Pa	ection 509(a rt i.)	1)(2)			
Sec	tion A. Public Support							
	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's lex-exempt purpose					30562	30562	
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					30562	30562	
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons					3302		
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	Ar was proved a second	agarija sat	テ _{ラ・・・}				
с 8	Add lines 7a and 7b		,				30562	
Sec	tion B. Total Support		1	_	 ,			
	ilendar year (or fiscal year beginning in)	· (a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					30562	30562	
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						·	
1 <u>1</u>	Add lines 10a and 10b 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)			1	1 770	30562	30562	
14	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage							
			<u></u>		<u> </u>	145		
15 16	Public support percentage for 2009 (lin			ne is, column	(D)	15	<u> </u>	
	6 Public support percentage from 2008 Schedule A, Part III, line 15							
17	Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) . 17						<u>%</u>	
18 19a	33½ % support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33½ %, and line 17 is not more than 33½ %, check this box and stop here. The organization qualifies as a publicly supported organization >						%, and line nization ▶ □	
b	line 18 is not more than 331/5 %, 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 19l	b, check this b	ox and see inst	ructions >	

Schedule A (Fo	xm 990 or 990-EZ) 2009	•			Page 4
Part IV	Supplemental Information. Part II, line 17a or 17b; and	Complete this Part III, line 12.	part to provide Provide any oth	the explanations required per additional information	by Part II, line 10; . See instructions.
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