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Form **990**

Return of Organization Exempt From Income Tax

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

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

Department of the Treasury
Internal Revenue Service

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010

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

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

C Name of organization
BARRY UNIVERSITY INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
11300 NE 2ND AVENUE

City or town, state or country, and ZIP + 4
MIAMI SHORES, FL 331616695

D Employer identification number
59-0624364

E Telephone number
(305) 899-3050

G Gross receipts $ 154,771,272

F Name and address of principal officer

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 Website: ▶ HTTP //WWW BARRY EDU

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1940 **M** State of legal domicile FL

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
BARRY UNIVERSITY IS A CATHOLIC INSTITUTION OF HIGHER EDUCATION FOUNDED IN 1940 BY THE ADRIAN DOMINICAN SISTERS GROUNDED IN THE LIBERAL ARTS TRADITION, BARRY UNIVERSITY IS A SCHOLARLY COMMUNITY COMMITED TO THE HIGHEST ACADEMIC STANDARDS IN UNDERGRADUATE, GRADUATE AND PROFESSIONAL EDUCATION IN THE CATHOLIC INTELLECTUAL TRADITION, INTEGRATION OF STUDY, REFLECTION AND ACTION INFORM THE INTELLECTUAL LIFE FAITHFUL TO THIS TRADITION, A BARRY EDUCATION AND UNIVERSITY EXPERIENCE FOSTER INDIVIDUAL AND COMMUNAL TRANSFORMATION WHERE LEARNING LEADS TO KNOWLEDGE AND TRUTH, REFLECTION LEADS TO INFORMED ACTION, AND A COMMITMENT TO SOCIAL JUSTICE LEADS TO COLLABORATIVE SERVICE BARRY UNIVERSITY PROVIDES OPPORTUNITIES FOR AFFIRMING OUR CATHOLIC IDENTITY, DOMINICAN HERITAGE, AND COLLEGIATE TRADITIONS CATHOLIC BELIEFS AND VALUES ARE ENRICHED BY ECUMENICAL AND INTERFAITH DIALOGUE THROUGH WORSHIP AND RITUAL, WE CELEBRATE OUR RELIGIOUS IDENTITY WHILE REMINAING A UNIVERSITY COMMUNITY WHERE ALL ARE WELCOM

2	Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
3	Number of voting members of the governing body (Part VI, line 1a)	3	30
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	30
5	Total number of employees (Part V, line 2a)	5	3,313
6	Total number of volunteers (estimate if necessary)	6	295
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	19,121
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)	6,631,885	5,243,439
	9	Program service revenue (Part VIII, line 2g)	131,184,492	142,273,722
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,395,466	13,685
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,549,183	3,726,653
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	142,761,026	151,257,499
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	78,011,960	82,950,407
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶2,237,895		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	53,026,727	55,989,151
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	131,038,687	138,939,558
	19	Revenue less expenses Subtract line 18 from line 12	11,722,339	12,317,941

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	145,363,390	162,617,342
	21	Total liabilities (Part X, line 26)	74,669,701	79,061,658
	22	Net assets or fund balances Subtract line 21 from line 20	70,693,689	83,555,684

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

Sign Here

▶ Signature of officer — Date 2011-05-12

▶ BRUCE EDWARDS VP, TREASURER
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶	Date 2011-05-13	Check if self-employed ▶ ☐	Preparer's identifying number (see instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶			EIN ▶
			Phone no ▶

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

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

BARRY UNIVERSITY IS A CATHOLIC INSTITUTION OF HIGHER EDUCATION FOUNDED IN 1940 BY THE ADRIAN DOMINICAN SISTERS GROUNDED IN THE LIBERAL ARTS TRADITION, BARRY UNIVERSITY IS A SCHOLARLY COMMUNITY COMMITED TO THE HIGHEST ACADEMIC STANDARDS IN UNDERGRADUATE, GRADUATE AND PROFESSIONAL EDUCATION IN THE CATHOLIC INTELLECTUAL TRADITION, INTEGRATION OF STUDY, REFLECTION AND ACTION INFORM THE INTELLECTUAL LIFE FAITHFUL TO THIS TRADITION, A BARRY EDUCATION AND UNIVERSITY EXPERIENCE FOSTER INDIVIDUAL AND COMMUNAL TRANSFORMATION WHERE LEARNING LEADS TO KNOWLEDGE AND TRUTH, REFLECTION LEADS TO INFORMED ACTION, AND A COMMITMENT TO SOCIAL JUSTICE LEADS TO COLLABORATIVE SERVICE BARRY UNIVERSITY PROVIDES OPPORTUNITIES FOR AFFIRMING OUR CATHOLIC IDENTITY, DOMINICAN HERITAGE, AND COLLEGIATE TRADITIONS CATHOLIC BELIEFS AND VALUES ARE ENRICHED BY ECUMENICAL AND INTERFAITH DIALOGUE THROUGH WORSHIP AND RITUAL, WE CELEBRATE OUR RELIGIOUS IDENTITY WHILE REMINAING A UNIVERSITY COMMUNITY WHERE ALL ARE WELCOM

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 501(c)(4) organizations and section 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 $ 79,534,991 including grants of $ 3,523,928) (Revenue $ 129,281,511)

INSTRUCTIONAL SERVICES TO GRADUATE AND UNDERGRADUATE STUDENTS BARRY UNIVERSITY OFFERS MORE THAN 100 UNDERGRADUATE, GRADUATE, PROFESSIONAL, AND DOCTORAL PROGRAMS TO APPROXIMATELY 8,800 FULL AND PART-TIME STUDENTS AT MULTIPLE SITES THROUGHOUT THE STATE OF FLORIDA

4b (Code) (Expenses $ 15,302,969 including grants of $) (Revenue $ 285,051)

STUDENT SERVICES THE STUDENT AFFAIRS DIVISION OF BARRY UNIVERSITY ADHERES TO THE PHILOSOPHY THAT STUDENTS SUCCEED WHEN ALL ASPECTS OF THEIR DEVELOPMENT ARE AT OPTIMUM LEVEL TO THIS END, THE STUDENT AFFAIRS STAFF STANDS READY TO SERVE AS A SUPPORT SYSTEM FOR BARRY STUDENTS THE SERVICES AVAILABLE INCLUDE THE BOOKSTORE, CAMPUS MINISTRY, CAREER SERVICES, COMMUTER STUDENT AFFAIRS, LEADERSHIP AND TRANSITION, COMMENCEMENT, COUNSELING AND PSYCHOLOGICAL, DINING, DISABILITY, HEALTH, INTERCULTURAL CENTER, PUBLIC SAFETY, RESIDENTIAL LIFE, STUDENT ACTIVITIES, STUDENT UNION, AND VOLUNTEER AND COMMUNITY SERVICES

4c (Code) (Expenses $ 12,478,938 including grants of $) (Revenue $ 2,294,587)

ACADEMIC SUPPORT BARRY UNIVERSITY OFFERS ACADEMIC SUPPORT TO STUDENTS AS IT RELATES TO LIBRARY, COMPUTER, AND LEARNING CENTER SUPPORT THE MONSIGNOR BARRY MEMORIAL LIBRARY INCLUDES MORE THAN 950,000 ITEMS, 1,300 JOURNAL SUBSCRIPTIONS, INCLUDING OVER 700 JOURNALS IN ELECTRONIC FULL TEXT A SIGNIFICANT STRENGTH IS THE EXCELLENT AMERICAN CATHOLIC COLLECTION THE BARRY LIBRARY INFORMATION SERVICES SYSTEM WEB (BLISSWEB) IS THE COMPUTERIZED ONLINE CATALOG LIBRARY'S HOLDINGS BLISSWEB CAN BE SEARCHED FROM TERMINALS AND COMPUTERS IN THE LIBRARY, COMPUTER LABS, DORMS, AND OFFICES ACROSS CAMPUS AS WELL AS AT HOME AND OFF-CAMPUS SITES THE LIBRARY IS A MEMBER OF SEFLIN (SOUTH EAST FLORIDA LIBRARY INFORMATION NETWORK), THE ONLINE COMPUTER LIBRARY CENTER (OCLC), A NATIONAL LIBRARY NETWORK, AND SOUTHEASTERN LIBRARY NETWORK (SOLINET) THE BARRY UNIVERSITY DWAYNE O ANDREAS SCHOOL OF LAW LIBRARY HOLDS OVER 180,000 VOLUMES AND 1600 SUBSCRIPTIONS THERE IS AVAILIBILITY TO NETWORKED FACULTY INCLUDING WIRED CARRELS AND TABLES IT IS OPEN TO THE ORLANDO LEGAL COMMUNITY ALSO, THE LIBRARIANS ARE LAW TRAINED

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**

(Expenses $ 8,486,640 including grants of $) (Revenue $ 10,412,573)

4e **Total program service expenses**▶$ 115,803,538

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	Yes	
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 similar funds or 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	Yes	
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	Yes	
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? *If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.*	11	Yes	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*			
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*			
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII.*			
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX.*			
	• Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*			
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? *If "Yes," complete Schedule D, Part X.*			
12	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional* — 12A Yes: ; No: No			
13	Is the organization a school 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 United States?	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 United States? *If "Yes," complete Schedule F, Part I*	14b		No
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 U S ? *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 U S ? *If "Yes," complete Schedule F, Part III*	16		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions 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 of gross income from gaming activities 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

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States 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 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *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 line 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	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *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, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? *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 sections 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	Yes	
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	**Section 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	Yes	
37	Did the organization conduct more than 5% 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
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

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	11,737			
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	3,313			
b	If at least one is reported on line 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 (see instructions)			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?			3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b	Yes	
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	Yes	
b	If "Yes," enter the name of the foreign country ▶VI 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 line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and 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 receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			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		No
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h		No
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		No
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		No
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		No
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** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body	1a 30			
b	Enter the number of voting members that are independent	1b 30			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		No
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	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b	Yes	
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	Yes	
9	Is there any officer, director, 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		9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11		No
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
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		No
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		No
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
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 ▶FL

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 ▶

BARRY UNIVERSITY
11300 NE 2ND AVENUE
MIAMI SHORES, FL 331616695
(305) 899-3598

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 Report compensation for the calendar year ending with or within the organization's tax year Use Schedule J-2 if additional space is needed

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees See instructions for definition of "key employee "
- 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 current or former officer, director, trustee or key employee

(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-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See add'l data										

1b Total . . . . ▶	2,306,225		312,232

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶12

		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 on line 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
SUMMERS PROFESSIONAL SERVICES 8897 SW 129 TERRACE MIAMI, FL 33176	CONSTRUCTION	491,298
NEW LIVING CONSTRUCTION 1835 E HALLANDALE BEACH BLVD 426 HALLANDALE BEACH, FL 33009	CONSTRUCTION	433,124
DUTTON PRESS INC 280 WEST 79TH PLACE HIALEAH, FL 33014	PRINTING	395,704
DELOITTE & TOUCHE LLP 200 SE 2ND STREET MIAMI, FL 33131	AUDITING	314,975
HOLLAND & KNIGHT LLP PO BOX 32092 LAKELAND, FL 33802	LEGAL	221,689

2 Total number of independent contractors (including but not limited to those listed above) 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 sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns . . 1a					
	b Membership dues 1b					
	c Fundraising events 1c	317,193				
	d Related organizations . . . 1d					
	e Government grants (contributions) 1e	3,794,753				
	f All other contributions, gifts, grants, and similar amounts not included above 1f	1,131,493				
	g Noncash contributions included in lines 1a-1f $					
	h **Total.** Add lines 1a-1f . . . . ▶		5,243,439			
Program Service Revenue		Business Code				
	2a TUITION AND FEES		131,333,897	131,333,897		
	b AUXILLIARY ENTERPRISES		10,412,573	10,412,573		
	c PODIATRIC CLINIC REVENUE		527,252	527,252		
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a–2f . . . . ▶		142,273,722			
Other Revenue	3 Investment income (including dividends, interest and other similar amounts) . . . . . ▶		459,678			459,678
	4 Income from investment of tax-exempt bond proceeds . . ▶					
	5 Royalties . . . . ▶					
		(i) Real / (ii) Personal				
	6a Gross Rents	(i) 704,172				
	b Less rental expenses					
	c Rental income or (loss)	(i) 704,172				
	d Net rental income or (loss) . . . . ▶		704,172			704,172
		(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory	(i) 2,748,257				
	b Less cost or other basis and sales expenses	(i) 3,194,250				
	c Gain or (loss)	(i) -445,993				
	d Net gain or (loss) . . . . ▶		-445,993			-445,993
	8a Gross income from fundraising events (not including $ 317,193 of contributions reported on line 1c) See Part IV, line 18 . . . a	147,393				
	b Less direct expenses . . . b	319,523				
	c Net income or (loss) from fundraising events . . ▶		-172,130	-172,130		
	9a Gross income from gaming activities See Part IV, line 19 . . . a					
	b Less direct expenses . . . b					
	c Net income or (loss) from gaming activities . . . ▶					
	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 . . ▶					
	Miscellaneous Revenue	Business Code				
	11a REIMBURSEMENTS		1,549,133	1,549,133		
	b STUDENT FEES		973,158	973,158		
	c INDIRECT COST RECOVERY		218,204	218,204		
	d All other revenue		454,116		19,121	434,995
	e **Total.** Add lines 11a–11d . . . . . . ▶		3,194,611			
	12 **Total revenue.** See Instructions . . . ▶		151,257,499	144,842,087	19,121	1,152,852

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				
2 Grants and other assistance to individuals in the U S See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,577,511	539,167	831,335	207,009
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	65,228,698	57,725,680	6,411,124	1,091,894
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	6,177,830	5,519,504	534,930	123,396
9 Other employee benefits	4,990,719	4,457,467	429,150	104,102
10 Payroll taxes	4,975,649	4,444,654	431,629	99,366
11 Fees for services (non-employees)				
a Management				
b Legal	421,692		421,692	
c Accounting	370,027		370,027	
d Lobbying				
e Professional fundraising *See Part IV, line 17* . .				
f Investment management fees	49,211		49,211	
g Other				
12 Advertising and promotion	1,440,668	65,406	1,360,575	14,687
13 Office expenses	7,041,548	5,885,721	1,031,840	123,987
14 Information technology				
15 Royalties . .				
16 Occupancy	146,031	146,031		
17 Travel	3,947,485	3,497,481	275,329	174,675
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	19,767		19,767	
20 Interest	1,765,707	1,628,747	136,960	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	4,903,031	4,481,861	421,170	
23 Insurance	2,631,089	288,105	2,342,984	
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 REPAIRS & MAINTENANCE	14,421,406	13,190,735	1,146,990	83,681
b MISCELLANEOUS	5,513,066	2,993,655	2,512,929	6,482
c OTHER FEES	4,909,453	3,153,725	1,725,200	30,528
d EQUIPMENT RENTAL/MAINT	4,224,604	3,953,851	139,078	131,675
e FOOD SERVICE	3,005,455	2,883,439	87,058	34,958
f All other expenses	1,178,911	948,309	219,147	11,455
25 **Total functional expenses.** Add lines 1 through 24f	138,939,558	115,803,538	20,898,125	2,237,895
26 **Joint costs.** Check here ▶ ☐ 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	22,189,977	1	29,980,127
	2	Savings and temporary cash investments		2	6,916,914
	3	Pledges and grants receivable, net	3,927,132	3	3,447,725
	4	Accounts receivable, net	4,728,773	4	5,384,449
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 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	1,183,299	7	1,491,586
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	5,638,283	9	7,152,239
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D* — 10a: 161,087,507			
	b	Less accumulated depreciation — 10b: 71,260,956	89,652,500	10c	89,826,551
	11	Investments—publicly traded securities	15,763,319	11	14,798,676
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	2,280,107	15	3,619,075
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	145,363,390	16	162,617,342
Liabilities	17	Accounts payable and accrued expenses	7,172,677	17	7,963,837
	18	Grants payable		18	
	19	Deferred revenue	688,584	19	530,901
	20	Tax-exempt bond liabilities	51,372,709	20	50,057,018
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*	51,276	21	70,803
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*		22	
	23	Secured mortgages and notes payable to unrelated third parties	5,479,271	23	12,238,278
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	9,905,184	25	8,200,821
	26	**Total liabilities.** Add lines 17 through 25	74,669,701	26	79,061,658
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	50,944,679	27	63,925,737
	28	Temporarily restricted net assets	6,887,777	28	6,642,797
	29	Permanently restricted net assets	12,861,233	29	12,987,150
		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	70,693,689	33	83,555,684
	34	Total liabilities and net assets/fund balances	145,363,390	34	162,617,342

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ___ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
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 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O . . .	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis			
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? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . .	3b	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

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.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
BARRY UNIVERSITY INC

Employer identification number
59-0624364

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches **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).**

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).**

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)**		
(ii) a family member of a person described in (i) above?	**11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s)

(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.)

Section A. Public Support

Calendar 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 shown on line 11, column (f)						
6 **Public Support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	**(a)** 2005	**(b)** 2006	**(c)** 2007	**(d)** 2008	**(e)** 2009	**(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 (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
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** ▶

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) | 14 |

15 Public Support Percentage for 2008 Schedule A, Part II, line 14 | 15 |

16a **33 1/3% support test—2009.** 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% support test—2008.** 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—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 ▶

b **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 not check a 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)** 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 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 through 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 $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public Support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	**(a)** 2005	**(b)** 2006	**(c)** 2007	**(d)** 2008	**(e)** 2009	**(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 June 30, 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** ▶☐

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from **2008** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2009.** 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% support tests—2008.** 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.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Additional Data

Software ID:
Software Version:
EIN: 59-0624364
Name: BARRY UNIVERSITY INC

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses $ 8,486,640 including grants of $) (Revenue $ 10,412,573)

AUXILIARY SERVICES BARRY UNIVERSITY OFFERS THE STUDENTS DINING, BOOKSTORE, AND RESIDENTIAL LIFE SERVICES THE PURPOSE OF THE OFFICE OF RESIDENTIAL LIFE IS TO WORK WITH STUDENTS, STAFF, AND FACULTY IN THE CREATION OF A CARING AND LEARNING ENVIRONMENT IN WHICH STUDENTS CAN FIND OPPORTUNITIES TO EXCEL ACADEMICALLY AND INTERPERSONALLY THE STAFF ACTS AS CATALYSTS IN THE DEVELOPMENT OF A HEALTHY, VIBRANT COMMUNITY WHERE INVOLVEMENT, LEADERSHIP, SPIRITUAL DEVELOPMENT, AND LIFE-LONG LEARNING ARE NATURAL COMPONENTS OF DAY-TO-DAY LIVING DINING SERVICES OFFER A VARIETY OF DINING CHOICES FOR STUDENTS AND VISITORS TO THE MIAMI SHORES CAMPUS ALL RESIDENT STUDENTS ARE REQUIRED TO CHOOSE FROM ONE OF FIVE MEAL PLAN OPTIONS MEAL PLANS ARE ALSO AVAILABLE FOR COMMUTER STUDENTS THE ROUSSELL DINING HALL IS AN ALL YOU CAN EAT FACILITY FEATURING A VARIETY OF FRESH FOOD DESIGNED TO SATISFY EVERYONE THIS FACILITY SERVES RESIDENT AND COMMUTER STUDENTS, PLUS FACULTY, STAFF AND GUESTS OF THE UNIVERSITY FULL SERVICE MEALS ARE SERVED SEVEN DAYS PER WEEK

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(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-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
GERALD W MOORE ESQ V CHAIRPERS	1 00	X						0	0	0
JOHN M BUSSEL V CHAIRPERS	1 00	X						0	0	0
MICHAEL O O'NEIL JR V CHAIRPERS	1 00	X						0	0	0
PATRICIA M ROSELLO V CHAIRPERS	1 00	X						0	0	0
ROBERT B GALT III ESQ V CHAIRPERS	1 00	X						0	0	0
ALEJANDRO AGUIRRE TRUSTEE	1 00	X						0	0	0
CHARLES R MODICA JD TRUSTEE	1 00	X						0	0	0
CHRISTOPHER J GRUCHACZ TRUSTEE	1 00	X						0	0	0
DONALD S ROSENBERG ESQ TRUSTEE	1 00	X						0	0	0
EDUARDO A OTERO MD TRUSTEE	1 00	X						0	0	0
GREGORY F GREENE TRUSTEE	1 00	X						0	0	0
JOEL H SHARP JR ESQ TRUSTEE	1 00	X						0	0	0
JORGE A GROSS CPA TRUSTEE	1 00	X						0	0	0
JOSEPH P KLOCK JR ESQ TRUSTEE	1 00	X						0	0	0
KEITH B KASHUK DPM TRUSTEE	1 00	X						0	0	0
LUIGI SALVANESCHI PHD TRUSTEE	1 00	X						0	0	0
NELSON L ADAMS III MD TRUSTEE	1 00	X						0	0	0
DR NETA KOLASA TRUSTEE	1 00	X						0	0	0
OLGA MELIN TRUSTEE	1 00	X						0	0	0
SHIRLEY MCVAY WISEMAN TRUSTEE	1 00	X						0	0	0
SR CORINNE SANDERS OP EDD TRUSTEE	1 00	X						0	0	0
SR ROSEMARY T FINNEGAN OP TRUSTEE	1 00	X						0	0	0
SR SHARON WEBER OP PHD TRUSTEE	1 00	X						0	0	0
PATRICIA L CLEMENTS PHD TRUSTEE	1 00	X						0	0	0
JOHN PRIMEAU TRUSTEE	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(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-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
EDWARD FEENANE TRUSTEE	1 00	X						0	0	0
REV CHARNEL JEANTY TRUSTEE	1 00	X						0	0	0
MAURA OWENS TRUSTEE	1 00	X						0	0	0
JAMES STELNICKI TRUSTEE	1 00	X						0	0	0
BRUCE EDWARDS VP, TREASUR	40 00			X				229,188	0	29,145
LINDA M PETERSON PROVOST	40 00			X				184,587	0	23,041
JOHN WALKER GENERAL COUN	40 00			X				178,288	0	22,298
DAVID DUDGEON GENERAL COUN	40 00			X				91,944	0	0
SR LINDA BEVILACQUA OP PHD PRESIDENT	40 00			X				0	0	42,217
WILLIAM J HEFFERNAN CHAIRPERSON	1 00			X				0	0	0
ANN PATON VP FOR INST	40 00				X			201,586	0	24,692
LETICIA DIAZ DEAN, LAW	40 00				X			191,022	0	22,140
PEGGE BELL CHS DEAN	40 00				X			160,532	0	15,672
MICHAEL GRIFFIN VP STUDENT A	40 00				X			158,133	0	22,444
JAMES W LOSITO PROFESSOR	40 00					X		202,016	0	16,287
JOHN P NELSON INTERIM DEAN	40 00					X		198,060	0	23,130
JOHN MCFADDEN ASSOCIATE DE	40 00					X		177,473	0	19,637
RONALD DICK PROFESSOR	40 00					X		167,556	0	22,022
THOMAS MERRILL PROFESSOR	40 00					X		165,840	0	24,251
JEANNE O'LAUGHLIN CHANCELLOR							X	0	0	5,256

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	**(A) Total expenses**	**(B) Program service expenses**	**(C) Management and general expenses**	**(D) Fundraising expenses**
REPAIRS & MAINTENANCE	14,421,406	13,190,735	1,146,990	83,681
MISCELLANEOUS	5,513,066	2,993,655	2,512,929	6,482
OTHER FEES	4,909,453	3,153,725	1,725,200	30,528
EQUIPMENT RENTAL/MAINT	4,224,604	3,953,851	139,078	131,675
FOOD SERVICE	3,005,455	2,883,439	87,058	34,958

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SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ Complete if the organization is described below.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then
- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then
- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization	Employer identification number
BARRY UNIVERSITY INC	59-0624364

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ▶ $

3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☑ No

4a Was a correction made? ☐ Yes ☑ No

b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities ▶ $

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☑ No

5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds If none, enter -0-	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ☐ if the filing organization belongs to an affiliated group

B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing Organization's Totals	**(b)** Affiliated Group Totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount Enter the amount from the following table in both columns		

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount is:**
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a If zero or less, enter -0-		
i Subtract line 1f from line 1c If zero or less, enter -0-		

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☑ **No**

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2006	**(b)** 2007	**(c)** 2008	**(d)** 2009	**(e)** Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B **Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?	Yes		75
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		30,536
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities? If "Yes," describe in Part IV		No	
j	Total lines 1c through 1i			30,611
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		No	

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		No
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		No
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		No

Part III-B **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".**

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i
Also, complete this part for any additional information

Identifier	Return Reference	Explanation
	SCHEDULE C, PART II-B, LINE 1I	BETWEEN JULY 1, 2009 AND JUNE 30, 2010, BARRY UNIVERSITY, AS A MEMBER OF THE INDEPENDENT COLLEGES AND UNIVERSITIES OF FLORIDA (ICUF), ADVOCATED FOR LEGISLATION THAT WOULD EXPAND FEDERAL AND STATE FUNDING FOR INDEPENDENT COLLEGES AND UNIVERSITIES FURTHERMORE, AS A MEMBER OF THE HISPANIC ASSOCIATION OF COLLEGES AND UNIVERSITIES, BARRY APPEALED TO MEMBERS OF CONGRESS TO SUPPORT FUNDING FOR HISPANIC-SERVING INSTITUTIONS AND INCREASE FUNDING FOR INSTITUTIONS OF HIGHER EDUCATION, GENERALLY AS A MEMBER OF THE NATIONAL ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES, BARRY UNIVERSITY ADVOCATED FOR LEGISLATION AT THE NATIONAL LEVEL FOR INDEPENDENT HIGHER EDUCATION SIMILAR PUBLIC POLICY ACTIVITY OCCURRED AT THE STATE LEVEL SPECIFICALLY, AT THE FEDERAL LEVEL, LOBBYING ACTIVITIES OCCURRED RELATED TO DEFENSE, ENERGY AND WATER, LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND TRANSPORTATION/HUD WITHIN THE STATE OF FLORIDA, THE PRESIDENT OF BARRY UNIVERSITY CONTACTED MEMBERS OF THE LEGISLATURE IN PERSON, VIA EMAIL AND US MAIL IN SUPPORT OF OF ICUF PRIORITY LEGISLATION IN ADDITION, A TEAM OF BARRY VOLUNTEERS VISITED THE CAPITOL, MEETING LEGISLATURE IN PERSON, ALSO IN SUPPORT OF ICUF PRIORITY LEGISLATION

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
BARRY UNIVERSITY INC

Employer identification number
59-0624364

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 for any other purpose conferring 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 a 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 ▶ 1

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

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ 40

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ 12,000

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 ▶ $ ______

(ii) Assets included in Form 990, Part X ▶ $ 186,476

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 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 the arrangement 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	24,924,787	28,377,879			
b	Contributions	134,063	205,861			
c	Investment earnings or losses	60,970	-3,444,348			
d	Grants or scholarships	-4,625	-176,981			
e	Other expenditures for facilities and programs					
f	Administrative expenses	-27,811	-37,624			
g	End of year balance	25,087,384	24,924,787			

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

a Board designated or quasi-endowment ▶ **18.870 %**

b Permanent endowment ▶ **51.770 %**

c Term endowment ▶ **29.360 %**

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		No

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) Accumulated depreciation	(d) Book value
1a Land	650,000	6,711,877		7,361,877
b Buildings	3,407,406	104,431,291	40,195,539	67,643,158
c Leasehold improvements		803,384	636,079	167,305
d Equipment		39,219,978	27,223,631	11,996,347
e Other		5,863,571	3,205,707	2,657,864
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				89,826,551

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
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
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

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

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
STUDENT DEPOSITS	4,877,005
OTHER	3,323,816
MINORITY INTEREST	
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	8,200,821

2. Fin 48 Footnote 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	151,257,499
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	138,939,558
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	12,317,941
4	Net unrealized gains (losses) on investments	4	226,810
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-1,042,730
9	Total adjustments (net) Add lines 4 - 8	9	-815,920
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	11,502,021

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	158,217,648
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	226,810		
b	Donated services and use of facilities	2b	115,790		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	6,347,236		
e	Add lines **2a** through **2d**			2e	6,689,836
3	Subtract line **2e** from line **1**			3	151,527,812
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	49,211		
b	Other (Describe in Part XIV)	4b	-319,524		
c	Add lines **4a** and **4b**			4c	-270,313
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	151,257,499

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

1	Total expenses and losses per audited financial statements			1	146,715,627
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	115,790		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d	7,389,966		
e	Add lines **2a** through **2d**			2e	7,505,756
3	Subtract line **2e** from line **1**			3	139,209,871
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	49,211		
b	Other (Describe in Part XIV)	4b	-319,524		
c	Add lines **4a** and **4b**			4c	-270,313
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	138,939,558

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 IV, 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 Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
ACCOUNTING FOR CONSERVATION EASEMENTS	SCHEDULE D, PAGE 1, PART II, LINE 9	THE UNIVERSITY RECORDS THE EASEMENT IN ITS STATEMENT OF FINANCIAL POSITION AS PART OF THE COST OF THE LAND PURCHASED FOR THE UNIVERSITY'S LAW SCHOOL IN ORLANDO
ESCROW LIABILITY ARRANGEMENT EXPLANATION	SCHEDULE D, PAGE 2, PART IV, LINE 2B	THE UNIVERSITY ACTS AS A CUSTODIAN FOR FUNDS HELD IN TRUST UNTIL DEATH OF DONOR AT WHICH TIME, THE FUNDS WILL TRANSFER TO THE UNIVERSITY
INTENDED USES FOR ENDOWMENT FUNDS	SCHEDULE D, PAGE 2, PART V, LINE 4	THE UNIVERSITY'S UNRESTRICTED ENDOWMENTS ARE RESTRICTED BY THE UNIVERSITY'S BOARD OF TRUSTEES THE BOARD CAN APPROPRIATE AS MUCH OF THE NET APPROPRIATION ON BOARD-DESIGNATED ENDOWMENTS AS IS PRUDENT CONSIDERING THE UNIVERSITY'S PRESENT AND ANTICIPATED FINANCIAL REQUIREMENTS, EXPECTED TOTAL RETURN ON INVESTMENTS, PRICE LEVEL TRENDS, AND GENERAL ECONOMIC CONDITIONS THE INCOME DERIVED FROM PERMANENTLY RESTRICTED ENDOWED FUNDS IS TO BE USED FOR VARIOUS PROGRAMS SPONSORED BY THE UNIVERSITY IN ACCORDANCE WITH THE DONOR'S WISHES AND IS CLASSIFIED AS UNRESTRICTED OR TEMPORARY RESTRICTED NET ASSETS, IN ACCORDANCE WITH THE DONOR'S WISHES
RECONCILIATION OF CHANGES - OTHER	SCHEDULE D, PAGE 4, PART XI, LINE 8	AFFILIATE REVENUE 6,230,215 ADJUST TO CASH SURRENDER VALUE 117,021 EXPENSES FOR SPECIAL EVENTS 319,524 AFFILIATE EXPENSE -7,389,966 OTHER EXPENSES 0 DEPRECIATION ON RENTAL PROPERTY 0 CONTROLLED ENTITY INTEREST 0 EXPENSES FOR SPECIAL EVENTS -319,524
REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER	SCHEDULE D, PAGE 4, PART XII, LINE 2D	AFFILIATE REVENUE 6,230,215 ADJUST TO CASH SURRENDER VALUE 117,021
REVENUE AMOUNTS INCLUDED ON RETURN - OTHER	SCHEDULE D, PAGE 4, PART XII, LINE 4B	EXPENSES FOR SPECIAL EVENTS -319,524
EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER	SCHEDULE D, PAGE 4, PART XIII, LINE 2D	AFFILIATE EXPENSE 7,389,966
EXPENSE AMOUNTS INCLUDED ON RETURN - OTHER	SCHEDULE D, PAGE 4, PART XIII, LINE 4B	OTHER EXPENSES 0 DEPRECIATION ON RENTAL PROPERTY 0 CONTROLLED ENTITY INTEREST 0 EXPENSES FOR SPECIAL EVENTS -319,524

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SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

►Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
BARRY UNIVERSITY INC

Employer identification number
59-0624364

			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	3	Yes	
	THE PUBLICITY REQUIREMENT OF REV PROC 75-50, 1975-2 C B 587 IS SATISFIED BY COMPLYING WITH SECTION 4 02 AS TO STATEMENT OF POLICY THE UNIVERSITY DRAWS ITS STUDENTS FROM LOCAL COMMUNITIES AND FOLLOWS A RACIALLY NONDISCRIMINATORY POLICY AS TO STUDENTS IT CURRENTLY ENROLLS STUDENTS OF RACIAL MINORITY GROUPS IN MEANINGFUL NUMBERS			
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, use Schedule O (Form 990)			
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, use Schedule O (Form 990)			
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 line 6a or line 6b, explain on Schedule O (Form 990)			
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," explain on Schedule O (Form 990)	7	Yes	

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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

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization
BARRY UNIVERSITY INC

Employer identification number
59-0624364

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

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

- a ☐ Mail solicitations
- b ☐ Internet and e-mail 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

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 FOUNDERS BALL (event type)	(b) Event #2 GOLF TOURNAMENT (event type)	(c) Other Events 1 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1	Gross receipts	236,365	131,932	96,289	464,586
	2	Less Charitable contributions	141,810	79,094	96,289	317,193
	3	Gross income (line 1 minus line 2)	94,555	52,838		147,393
Direct Expenses	4	Cash prizes		1,250		1,250
	5	Non-cash prizes		14,261		14,261
	6	Rent/facility costs				
	7	Food and beverages	62,844	33,004		95,848
	8	Entertainment	8,400	200		8,600
	9	Other direct expenses	23,311	4,122	172,131	199,564
	10	Direct expense summary Add lines 4 through 9 in column (d)				319,523
	11	Net income summary Combine lines 3, column d, and line 10				-172,130

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, column d, and line 7				

			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	Enter 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 J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
BARRY UNIVERSITY INC

Employer identification number
59-0624364

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 ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☑ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision 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 ☐ Independent compensation consultant ☐ Form 990 of other organizations ☑ Written employment contract ☐ Compensation survey or study ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
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			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
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**	Yes	
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
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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) Retirement and other 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 reportable compensation				
BRUCE EDWARDS	(i)	228,228		960		29,145	258,333	
	(ii)							
LINDA M PETERSON	(i)	184,587				23,041	207,628	
	(ii)							
JOHN WALKER	(i)	178,288				22,298	200,586	
	(ii)							
ANN PATON	(i)	201,106		480		24,692	226,278	
	(ii)							
LETICIA DIAZ	(i)	191,022				22,140	213,162	
	(ii)							
PEGGE BELL	(i)	160,532				15,672	176,204	
	(ii)							
MICHAEL GRIFFIN	(i)	158,133				22,444	180,577	
	(ii)							
JAMES W LOSITO	(i)	202,016				16,287	218,303	
	(ii)							
JOHN P NELSON	(i)	195,060		3,000		23,130	221,190	
	(ii)							
JOHN MCFADDEN	(i)	177,473				19,637	197,110	
	(ii)							
RONALD DICK	(i)	167,556				22,022	189,578	
	(ii)							
THOMAS MERRILL	(i)	165,840				24,251	190,091	
	(ii)							
JEANNE O'LAUGHLIN	(i)					5,256	5,256	
	(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

Identifier	Return Reference	Explanation
COMPENSATION CONTINGENT UPON REVENUES OF ORGANIZATION	SCHEDULE J, PAGE 1, PART I, LINE 5A	PHYSICIANS IN SCHOOL OF PODIATRY RECEIVED A PERCENT OF GROSS RECEIPTS OF THE TEACHING CLINICS

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990).
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
BARRY UNIVERSITY INC

Employer identification number
59-0624364

Part I Bond Issues

	(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	PINELLAS COUNTY EDUCATIONAL FACILIT	59-6000800	723161FP5	10-24-2007	10,000,000	(SEE SCHEDULE O)		X		X

Part II Proceeds

		A	B	C	D	E
1	Total proceeds of issue	9,293,875				
2	Gross proceeds in reserve funds					
3	Proceeds in refunding or defeasance escrows					
4	Other unspent proceeds					
5	Issuance costs from proceeds	300,922				
6	Working capital expenditures from proceeds	6,959,558				
7	Capital expenditures from proceeds	2,739,520				
8	Year of substantial completion	2008				

		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?		X								
10	Were the bonds issued as part of an advance refunding issue?		X								
11	Has the final allocation of proceeds been made?	X									
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X									

Part III Private Business Use

		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?		X								
2	Are there any lease arrangements with respect to the financed property which may result in private business use?		X								

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?		X								
3b	Are there any research agreements with respect to the financed property which may result in private business use?		X								
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?		X								
4	Enter the percentage of financed property used in a private business use by entities other than a section 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 section 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?	X									

Part IV Arbitrage

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X								
2	Is the bond issue a variable rate issue?	X									
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?	X									
b	Name of provider	BANK OF AMERICA									
c	Term of hedge	20 0									
4a	Were gross proceeds invested in a GIC?		X								
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?		X								
6	Did the bond issue qualify for an exception to rebate?		X								

Additional Data

Software ID:
Software Version:
EIN: 59-0624364
Name: BARRY UNIVERSITY INC

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SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
BARRY UNIVERSITY INC

Employer identification number
59-0624364

Identifier	Return Reference	Explanation
ORGANIZATION'S MISSION	FORM 990 - ORGANIZATION'S MISSION	BARRY UNIVERSITY IS A CATHOLIC INSTITUTION OF HIGHER EDUCATION FOUNDED IN 1940 BY THE ADRIAN DOMINICAN SISTERS GROUNDED IN THE LIBERAL ARTS TRADITION, BARRY UNIVERSITY IS A SCHOLARLY COMMUNITY COMMITED TO THE HIGHEST ACADEMIC STANDARDS IN UNDERGRADUATE, GRADUATE AND PROFESSIONAL EDUCATION IN THE CATHOLIC INTELLECTUAL TRADITION, INTEGRATION OF STUDY, REFLECTION AND ACTION INFORM THE INTELLECTUAL LIFE FAITHFUL TO THIS TRADITION, A BARRY EDUCATION AND UNIVERSITY EXPERIENCE FOSTER INDIVIDUAL AND COMMUNAL TRANSFORMATION WHERE LEARNING LEADS TO KNOWLEDGE AND TRUTH, REFLECTION LEADS TO INFORMED ACTION, AND A COMMITMENT TO SOCIAL JUSTICE LEADS TO COLLABORATIVE SERVICE BARRY UNIVERSITY PROVIDES OPPORTUNITIES FOR AFFIRMING OUR CATHOLIC IDENTITY, DOMINICAN HERITAGE, AND COLLEGIATE TRADITIONS CATHOLIC BELIEFS AND VALUES ARE ENRICHED BY ECUMENICAL AND INTERFAITH DIALOGUE THROUGH WORSHIP AND RITUAL, WE CELEBRATE OUR RELIGIOUS IDENTITY WHILE REMINAING A UNIVERSITY COMMUNITY WHERE ALL ARE WELCOME

Identifier	Return Reference	Explanation
SECOND ACHIEVEMENT DESCRIPTION	FORM 990, PAGE 2, PART III, LINE 4B	STUDENT ACTIVITIES, STUDENT UNION, AND VOLUNTEER AND COMMUNITY SERVICES

Identifier	Return Reference	Explanation
THIRD ACHIEVEMENT DESCRIPTION	FORM 990, PAGE 2, PART III, LINE 4C	TERMINALS AND COMPUTERS IN THE LIBRARY, COMPUTER LABS, DORMS, AND OFFICES ACROSS CAMPUS AS WELL AS AT HOME AND OFF-CAMPUS SITES THE LIBRARY IS A MEMBER OF SEFLIN (SOUTH EAST FLORIDA LIBRARY INFORMATION NETWORK), THE ONLINE COMPUTER LIBRARY CENTER (OCLC), A NATIONAL LIBRARY NETWORK, AND SOUTHEASTERN LIBRARY NETWORK (SOLINET) THE BARRY UNIVERSITY DWAYNE O ANDREAS SCHOOL OF LAW LIBRARY HOLDS OVER 180,000 VOLUMES AND 1600 SUBSCRIPTIONS THERE IS AVAILIBILITY TO NETWORKED FACULTY INCLUDING WIRED CARRELS AND TABLES IT IS OPEN TO THE ORLANDO LEGAL COMMUNITY ALSO, THE LIBRARIANS ARE LAW TRAINED

Identifier	Return Reference	Explanation
ALL OTHER ACHIEVEMENTS DESCRIPTION	FORM 990, PAGE 2, PART III, LINE 4D	AUXILIARY SERVICES BARRY UNIVERSITY OFFERS THE STUDENTS DINING, BOOKSTORE, AND RESIDENTIAL LIFE SERVICES THE PURPOSE OF THE OFFICE OF RESIDENTIAL LIFE IS TO WORK WITH STUDENTS, STAFF, AND FACULTY IN THE CREATION OF A CARING AND LEARNING ENVIRONMENT IN WHICH STUDENTS CAN FIND OPPORTUNITIES TO EXCEL ACADEMICALLY AND INTERPERSONALLY THE STAFF ACTS AS CATALYSTS IN THE DEVELOPMENT OF A HEALTHY, VIBRANT COMMUNITY WHERE INVOLVEMENT, LEADERSHIP, SPIRITUAL DEVELOPMENT, AND LIFE-LONG LEARNING ARE NATURAL COMPONENTS OF DAY-TO-DAY LIVING DINING SERVICES OFFER A VARIETY OF DINING CHOICES FOR STUDENTS AND VISITORS TO THE MIAMI SHORES CAMPUS ALL RESIDENT STUDENTS ARE REQUIRED TO CHOOSE FROM ONE OF FIVE MEAL PLAN OPTIONS MEAL PLANS ARE ALSO AVAILABLE FOR COMMUTER STUDENTS THE ROUSSELL DINING HALL IS AN ALL YOU CAN EAT FACILITY FEATURING A VARIETY OF FRESH FOOD DESIGNED TO SATISFY EVERYONE THIS FACILITY SERVES RESIDENT AND COMMUTER STUDENTS, PLUS FACULTY, STAFF AND GUESTS OF THE UNIVERSITY FULL SERVICE MEALS ARE SERVED SEVEN DAYS PER WEEK

Identifier	Return Reference	Explanation
FINANCIAL ACCOUNTS IN FOREIGN COUNTRIES	FORM 990, PART V, LINE 4B	BRITISH VIRGIN ISLANDS

Identifier	Return Reference	Explanation
CLASSES OF MEMBERS OR STOCKHOLDERS	FORM 990, PAGE 6, PART VI, LINE 6	THE MEMBERSHIP OF THE UNIVERSITY CONSISTS OF THE MEMBERS OF THE BOARD OF TRUSTEES ("BOARD")

Identifier	Return Reference	Explanation
ELECTION OF MEMBERS AND THEIR RIGHTS	FORM 990, PAGE 6, PART VI, LINE 7A	AN INDIVIDUAL SHALL BE ELECTED AS A TRUSTEE BY A MAJORITY VOTE OF THE CURRENT BOARD ONCE THE INDIVIDUAL IS ELECTED BY THE BOARD, THE TRUSTEE WILL SERVE ON THE BOARD FOR A FOUR (4) YEAR TERM

Identifier	Return Reference	Explanation
DECISIONS SUBJECT TO APPROVAL OF MEMBERS	FORM 990, PAGE 6, PART VI, LINE 7B	THE BUSINESS AFFAIRS OF THE UNIVERSITY IS MANAGED BY THE BOARD WHO IS ELECTED OR APPOINTED AS SET FORTH IN THE BYLAWS OF THE CORPORATION

Identifier	Return Reference	Explanation
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11	BARRY UNIVERSITY USES THE FOLLOWING PROCESS TO REVIEW THE FORM 990 THE UNIVERSITY'S CONTROLLER PREPARES THE RETURN, THE ASSOCIATE VICE PRESIDENT OF FINANCE AND CHIEF ACCOUNTING OFFICER REVIEWS THE RETURN, AND THE VICE PRESIDENT OF BUSINESS AND FINANCE APPROVES AND SIGNS THE RETURN THE CONTROLLER ELECTRONICALLY FILES THE RETURN ON OR BEFORE THE DUE DATE INCLUDING EXTENSIONS

Identifier	Return Reference	Explanation
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	ON AN ANNUAL BASIS, UNDER THE CONFLICT OF INTEREST POLICY, EACH COVERED PERSON SHALL EXECUTE AN ANNUAL DISCLOSURE STATEMENT DISCLOSING THE FACTS RELATED TO ANY COVERED RELATIONSHIP ONGOING A COVERED PERSON SHALL DISCLOSE THE EXISTENCE AND NATURE OF ANY COVERED RELATIONSHIP AND ALL MATERIAL FACTS PRIOR TO THE CONSIDERATION OF A PROPOSED TRANSACTION OR ARRANGEMENT BY THE BOARD (FOR A TRUSTEE OR THE PRESIDENT) OR THE ECA (EXECUTIVE COMMITTEE OF THE ADMINISTRATION)(FOR COVERED PERSONS NOT TRUSTEES) IN THE EVENT THAT A POTENTIAL CONFLICT OF INTEREST ARISES AT A BOARD MEETING FOR A TRUSTEE OR THE PRESIDENT, THEN THE COVERED PERSON HAVING SUCH A COVERED RELATIONSHIP IN ANY MATTER SHALL DISCLOSE ANY MATERIAL FACTS AS TO SUCH COVERED RELATIONSHIP TO THE BOARD IN THE EVENT THAT A POTENTIAL CONFLICT OF INTEREST ARISES OUTSIDE A BOARD MEETING AND/OR FOR A COVERED PERSON NOT A TRUSTEE, THEN THE COVERED PERSON HAVING SUCH A COVERED RELATIONSHIP IN ANY MATTER SHALL DISCLOSE ANY MATERIAL FACTS AS TO SUCH COVERED RELATIONSHIP TO THE ECA AFTER DISCLOSURE BY A TRUSTEE OR THE PRESIDENT TO THE BOARD OF A COVERED RELATIONSHIP AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE COVERED PERSON, HE/SHE SHALL LEAVE THE BOARD MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON AFTER DISCLOSURE BY ANYONE OTHER THAN A TRUSTEE TO THE ECA OF A COVERED RELATIONSHIP AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE COVERED PERSON, THE ECA WILL DISCUSS AND VOTE UPON THE DETERMINATION OF A CONFLICT OF INTEREST A COVERED PERSON THAT IS A TRUSTEE OR THE PRESIDENT MAY MAKE A PRESENTATION TO THE BOARD, BUT AFTER SUCH PRESENTATION, HE/SHE SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE FINANCIAL TRANSACTION OR ARRANGEMENT THAT CAUSES A CONFLICT OF INTEREST THE CHAIRPERSON OF THE BOARD, IF APPROPRIATE IN HIS/HER DISCRETION, MAY APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED FINANCIAL TRANSACTION OR ARRANGEMENT AFTER EXERCISING DUE DILIGENCE, THE BOARD SHALL DETERMINE WHETHER THE UNIVERSITY CAN OBTAIN A MORE ADVANTAGEOUS FINANCIAL TRANSACTION OR ARRANGEMENT WITH REASONABLE EFFORTS FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST IF A MORE ADVANTAGEOUS FINANCIAL TRANSACTION OR ARRANGEMENT IS NOT REASONABLY ATTAINABLE UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST, THE BOARD SHALL DETERMINE BY A SUPER MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE FINANCIAL TRANSACTION OR ARRANGEMENT IS IN THE UNIVERSITY'S BEST INTEREST AND FOR ITS OWN BENEFIT AND WHETHER THE FINANCIAL TRANSACTION IS FAIR AND REASONABLE TO THE UNIVERSITY AND SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE FINANCIAL TRANSACTION OR ARRANGEMENT IN CONFORMITY WITH SUCH DETERMINATION A COVERED PERSON (NOT A TRUSTEE) MAY MAKE A PRESENTATION TO THE ECA, BUT AFTER SUCH PRESENTATION, HE/SHE SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE FINANCIAL TRANSACTION OR ARRANGEMENT THAT CAUSES A CONFLICT OF INTEREST THE ECA, IF APPROPRIATE IN ITS DISCRETION, MAY APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED FINANCIAL TRANSACTION OR ARRANGEMENT AFTER EXERCISING DUE DILIGENCE, THE ECA SHALL DETERMINE WHETHER THE UNIVERSITY CAN OBTAIN A MORE ADVANTAGEOUS FINANCIAL TRANSACTION OR ARRANGEMENT WITH REASONABLE EFFORTS FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST IF A MORE ADVANTAGEOUS FINANCIAL TRANSACTION OR ARRANGEMENT IS NOT REASONABLY ATTAINABLE UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST, THE ECA SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED ECA MEMBERS WHETHER THE FINANCIAL TRANSACTION OR ARRANGEMENT IS IN THE UNIVERSITY'S BEST INTEREST AND FOR ITS OWN BENEFIT AND WHETHER THE FINANCIAL TRANSACTION IS FAIR AND REASONABLE TO THE UNIVERSITY AND SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE FINANCIAL TRANSACTION OR ARRANGEMENT IN CONFORMITY WITH SUCH DETERMINATION IF A MAJORITY VOTE CANNOT BE ATTAINED BY THE ECA THEN THE CONFLICT OF INTEREST WILL BE DECIDED BY THE BOARD IF THE BOARD HAS REASONABLE CAUSE TO BELIEVE THAT A TRUSTEE OR PRESIDENT HAS FAILED TO DISCLOSE ONE OR MORE COVERED RELATIONSHIPS, IT SHALL INFORM THE TRUSTEE OR PRESIDENT OF THE BASIS FOR SUCH BELIEF AND AFFORD THE TRUSTEE OR PRESIDENT AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE IF, AFTER HEARING THE RESPONSE OF THE TRUSTEE OR PRESIDENT AND MAKING SUCH FURTHER INVESTIGATION AS MAY BE WARRANTED IN THE CIRCUMSTANCES, THE BOARD DETERMINES THAT THE TRUSTEE OR PRESIDENT HAS IN FACT KNOWINGLY FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION AS IT DEEMS PROPER IN ITS SOLE DISCRETION THE VIOLATION OF THIS POLICY IS A SERIOUS MATTER AND MAY RESULT IN THE REMOVAL OF THE TRUSTEE FROM THE BOARD OR THE TERMINATION OF THE PRESIDENT'S CONTRACTUAL RELATIONSHIP WITH THE UNIVERSITY IF THE ECA HAS REASONABLE CAUSE TO BELIEVE THAT A COVERED EMPLOYEE HAS FAILED TO DISCLOSE ONE OR MORE COVERED RELATIONSHIPS, IT SHALL INFORM THE COVERED EMPLOYEE OF THE BASIS FOR SUCH BELIEF AND AFFORD THE COVERED EMPLOYEE AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE IF, AFTER HEARING THE RESPONSE OF THE COVERED EMPLOYEE AND MAKING SUCH FURTHER INVESTIGATION AS MAY BE WARRANTED IN THE CIRCUMSTANCES, THE ECA DETERMINES THAT THE COVERED EMPLOYEE HAS IN FACT KNOWINGLY FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION AS IT DEEMS PROPER IN ITS SOLE DISCRETION THE VIOLATION OF THIS POLICY IS A SERIOUS MATTER AND MAY RESULT IN THE TERMINATION OF THE COVERED EMPLOYEE'S CONTRACTUAL RELATIONSHIP WITH THE UNIVERSITY THE MINUTES OF THE BOARD OR ECA RELATING TO ALL CONFLICTS OF INTEREST SHALL CONTAIN THE FOLLOWING INFORMATION THE NAMES OF THE PERSONS WHO DISCLOSED OR OTHERWISE WERE FOUND TO HAVE COVERED RELATIONSHIPS IN CONNECTION WITH AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, THE NATURE OF THE COVERED RELATIONSHIP, ANY ACTION TAKEN TO DETERMINE WHETHER A CONFLICT OF INTEREST WAS PRESENT, AND THE BOARD'S OR ECA'S DECISION AS TO WHETHER A CONFLICT OF INTEREST IN FACT EXISTED THE NAMES OF PERSONS WHO WERE PRESENT FOR DISCUSSIONS AND VOTES RELATING TO THE FINANCIAL TRANSACTION OR ARRANGEMENT, THE CONTENT OF THE DISCUSSION, INCLUDING ANY ALTERNATIVE TO THE PROPOSED FINANCIAL TRANSACTION OR ARRANGEMENT, AND A RECORD OF ANY VOTES TAKEN IN CONNECTION THEREWITH

Identifier	Return Reference	Explanation
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	THE PRESIDENT/CEO'S COMPENSATION IS REVIEWED ANNUALLY, COMPARABLE DATA/INFORMATION IS REVIEWED THE COMPENSATION IS IN KEEPING WITH THE UNIVERSITY'S GUIDELINES THE CHAIRPERSON AND THE EXECUTIVE COMMITTEE OF THE BOARD CONDUCT THE ANNUAL EVALUATION OF THE PRESIDENT THE DISCUSSIONS AND DECISIONS FORM PART OF THE MINUTES TO THE BOARD OF TRUSTEE'S MEETING

Identifier	Return Reference	Explanation
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	THE UNIVERSITY MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND AUDITED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST THE 990 RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX IS PUBLIC INFORMATION

Identifier	Return Reference	Explanation
PUBLICATION OF NONDISCRIMINATORY POLICY IN MEDIA EXPLANATION	SCHEDULE E, LINE 3	GROUPS IN MEANINGFUL NUMBERS

Identifier	Return Reference	Explanation
FINANCIAL AID OR GOVERNMENT ASSISTANCE EXPLANATION	SCHEDULE E, LINE 6	BARRY UNIVERSITY RECEIVES ASSISTANCE FROM TITLE IV PROGRAMS INCLUDING PELL, SEOG, CWSP, FFELP, ETC

Identifier	Return Reference	Explanation
PURPOSE OF ISSUE DESCRIPTION	SCHEDULE K	PINELLAS COUNTY EDUCATIONAL FACILIT THE PURPOSE OF THE BOND ISSUE IS TO FUND THE CONSTRUCTION OF A BUILDING AND THE EQUIPMENT FOR THE INSTITUTE OF COMMUNITY HEALTH & MINORITY MEDICINE, A GRADUATE MEDICAL SCIENCE BUILDING, WHICH WILL PROVIDE OFFICE SPACE FOR FACULTY, CLASSROOM SPACE FOR STUDENTS AND HOUSE VARIOUS HEALTH PROGRAMS, AND RELATED IMPROVEMENTS OF THE UNIVERSITY, AND REFINANCE A LOAN DATED MAY 7, 2004 FROM BANK OF AMERICA, N A TO THE UNIVERSITY IN THE ORIGINAL AMOUNT OF 7,300,000 AND PAY COSTS OF ISSUING THE SERIES 2007 BONDS

Identifier	Return Reference	Explanation
ADDITIONAL INFORMATION	SCHEDULE O	FORM 990 PART VII COMPENSATION OF OFFICERS, DIRECTORS, TRUSTEES, KEY EMPLOYEES, HIGHEST COMPENSATED EMPLOYEES, AND INDEPENDENT CONTRACTORS -- SR LINDA BEVILACQUA'S COMPENSATION IS PAID DIRECTLY TO THE ADRIAN DOMINICAN CONGREGATION

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
BARRY UNIVERSITY INC

Employer identification number
59-0624364

Part I **Identification of Disregarded Entities** (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II **Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
BARRY TELECOMMUNICATIONS INC 3401 SOUTH CONGRESS AVENUE BOYNTON BEACH, FL 33426 65-0728353	RADIO & TV	FL	501	7	NA

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No
6484 INDIAN CREEK DRIVE LTD 11300 NE 2ND AVENUE MIAMI SHORES, FL33161 65-0669854	REAL ESTAT	FL	N/A	EXCLUDED	39,469	401,723		No		Yes	

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
6484 INDIAN CREEK DRIVE INC 11300 NE 2ND AVENUE MIAMI SHORES, FL33161 65-0669852	REAL ESTAT	FL	N/A	C CORP	6,500	3,902	100 000 %

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

		Yes	No
Note. Complete line 1 if any entity is listed in Parts II, III or IV			
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to other organization(s)	1b		No
c Gift, grant, or capital contribution from other organization(s)	1c		No
d Loans or loan guarantees to or for other organization(s)	1d	Yes	
e Loans or loan guarantees by other organization(s)	1e		No
f Sale of assets to other organization(s)	1f		No
g Purchase of assets from other organization(s)	1g		No
h Exchange of assets	1h		No
i Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k Performance of services or membership or fundraising solicitations for other organization(s)	1k		No
l Performance of services or membership or fundraising solicitations by other organization(s)	1l		No
m Sharing of facilities, equipment, mailing lists, or other assets	1m		No
n Sharing of paid employees	1n		No
o Reimbursement paid to other organization for expenses	1o		No
p Reimbursement paid by other organization for expenses	1p		No
q Other transfer of cash or property to other organization(s)	1q		No
r Other transfer of cash or property from other organization(s)	1r	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1) BARRY TELECOMMUNICATIONS INC	D	1,150,000
(2) 6484 INDIAN CREEK LTD	R	32,798
(3) 6484 INDIAN CREEK INC	R	4,873
(4)		
(5)		
(6)		

Part VI **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No