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Form **990** 

Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

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

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

2009

OMB No 1545-0047

Open to Public

A Fo	r the	2009 ca	lendar yea	r, or tax year beginning 07	-01-2009 and ending 06-30-2010	ı		
<b>B</b> Che	eck ıf a	pplicable	Please	C Name of organization	TU		D Employer id	entification number
┌ Add			use IRS	THE UNIVERSITY OF THE SOU	TH .		62-04756	97
┌ Nar	ne cha	nge	label or print or	Doing Business As			E Telephone n	umber
Init		_	type. See Specific				(931) 598-	1349
_			Instruc-	Number and street (or P O b 735 UNIVERSITY AVE	ox if mail is not delivered to street addres	s) Room/suite	<b>G</b> Gross receipts	s \$ 101,322,172
Ter			tions.					
☐ Am	ended	return		City or town, state or country SEWANEE, TN 373831000	, and ZIP + 4			
☐ App	lication	n pending		3EW/WEE, 111 373031000				
			<b>F</b> Nan	ne and address of principal	officer	H(a) Is th	■ nis a group retui	n for
				M MCCARDELL			ates?	ΓYes <b>Γ</b> Nο
				NIVERSITY AVE NEE,TN 373831000		11/6\ 4	661:-4 :1	4-45 Ev. Ev.
				,			all affiliates includ	· ·
Ta:	x-exen	npt status	▼ 501(c)	) ( 3 ) ◀ (insert no )	a)(1) or 527		up exemption n	t (see instructions)
	abait 4		FD //\A/\A/\A/	CEWANEE EDII		n(c)	ap exemption in	
	ebsite	e: F	P // VV VV VV	SEWANEE EDU	l			
			Corporat	ion Trust Association C	ther 🟲	<b>L</b> Year of fe	ormation 1857	M State of legal domicile TN
Pa	rt I		•					
	1		lescribe th TACHMEN	e organization's mission or	most significant activities			
9		SEEAI	TACHMEN	11 3				
Ē								
Governance								
\$	2	Check t	hıs box 🛏	f the organization discon	tinued its operations or disposed	of more than	25% of its net	assets
	3	Number	of voting r	nembers of the governing b	ody (Part VI, line 1a)		. 3	138
Activities &	4	Number	ofindepen	dent voting members of th	e governing body (Part VI, line 1b	)	. 4	134
Ħ,	5	Total nu	ımber of en	nployees (Part V , line 2a)			5	1,715
룾	6	Total nu	ımber of vo	lunteers (estimate if neces	sary)		•	1,113
ď	7a	Total gr	oss unrela	ted business revenue from	Part VIII, column (C), line 12 .	•	7	'a0
	ь	Net unre	elated busi	ness taxable income from	Form 990-T, line 34		7	ъ
						Pri	or Year	Current Year
	8	Contrib	outions and	d grants (Part VIII, line 1h	)		10,947,005	16,545,255
≗	9				, )		74,076,265	76,227,285
Rayenue	10	_		•	lines 3, 4, and 7d )		-10,821,254	6,996,402
걆	11				5, 6d, 8c, 9c, 10c, and 11e)		1,782,504	1,553,230
	12				t equal Part VIII, column (A), line			
							75,984,520	101,322,172
	13				olumn (A), lines 1-3)		18,301,808	19,779,479
	14	Benefit	s paid to c	r for members (Part IX, co	umn (A), line 4)		0	0
	15	Salarıe	s, other co	ompensation, employee ber	nefits (Part IX, column (A), lines 5	_		
Expenses		10)					42,990,357	43,976,881
কু	16a	Profess	sional fund	raising fees (Part IX, colur	nn (A), line 11e)		0	0
ਡੋ	ь	Total fur	ndraising exp	enses (Part IX, column (D), line	25) <b>▶</b> 1,898,395			
_	17	Other	expenses (	(Part IX, column (A), lines	11a-11d, 11f-24f)		36,295,169	33,359,382
	18	Total e	xpenses /	Add lines 13–17 (must equ	ıal Part IX, column (A), lıne 25)		97,587,334	97,115,742
	19	Revenu	ue less exp	oenses Subtract line 18 fro	om line 12		-21,602,814	4,206,430
ን ያ						Beginnin	ng of Current	End of Year
Net Assets or Fund Balances							Year	
3 B	20	Total a	issets (Pai	t X, line 16)			458,457,201	493,949,523
48	21	Total lı	iabilities (F	Part X, line 26)			57,834,809	60,785,513
<u> </u>	22	Net as:	sets or fun	d balances Subtract line 2	1 from line 20		400,622,392	433,164,010
Pai	t II	Signa	ature Blo	ock				
					nned this return, including accompanying in of preparer (other than officer) is based			
		and belie	er, it is true, i	correct, and complete Deciaratio	n or preparer (other than officer) is based	on all imonna	поп от which ртера	Ter rias ariy kriowiedge
Sign	l	****	**			2010	0-05-04	
Here		Signa	ature of office	er		Date		
		SARA	H SUTHERIA	ND ASSISTANT TREASURER				
			or print nam					
		Dron- '	- <b>L</b>		Date C	heck if	Preparer's ident	ufving number
De: 4		Preparer's signature		RD M WINSTEAD	Se	elf	(see instruction	
Paid	. r l -	-	<u>'</u>	1 000		mpolyed 🕨 🦳		
Prepa		Firm's na if self-em	me (or yours aployed),	CROSSLIN & ASSOCIATES P			EIN Þ	
Use (	IIIY		and ZIP + 4	2525 WEST END SUITE 110	0			
_				NASHVILLE, TN 37203			Phone no 🕨 (	615) 320-5500 
Mayt	he IR	S discus	s this retu	·	above? (see instructions)			✓ Yes

### Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

THE UNIVERSITY OF THE SOUTH IS AN INSTITUTION OF THE EPISCOPAL CHURCH DEDICATED TO THE PURSUIT OF KNOWLEDGE, UNDERSTANDING, AND WISDOM IN CLOSE COMMUNITY AND IN FULL FREEDOM OF INQUIRY, AND ENLIGHTENED BY CHRISTIAN FAITH IN THE ANGLICAN TRADITION, WELCOMING INDIVIDUALS FROM ALL BACKGROUNDS, TO THE END THAT STUDENTS BE PREPARED TO SEARCH FOR TRUTH, SEEK JUSTICE, PRESERVE LIBERTY UNDER LAW, AND SERVE GOD AND HUMANITY THE COLLEGE OF ARTS AND SCIENCES IS COMMITTED TO THE DEVELOPMENT OF THE WHOLE PERSON THROUGH A LIBERAL ARTS EDUCATION OF THE HIGHEST QUALITY OUTSTANDING STUDENTS WORK CLOSELY WITH DISTINGUISHED AND DIVERSE FACULTY IN A DEMANDING COURSE OF HUMANE AND SCIENTIFIC STUDY THAT PREPARES THEM FOR LIVES OF ACHIEVEMENT AND SERVICE PROVIDING RICH OPPORTUNITIES FOR LEADERSHIP AND INTELLECTUAL AND SPIRITUAL GROWTH, WHILE GROUNDING ITS COMMUNITY ON A PLEDGE OF HONOR, SEWANEE ENABLES STUDENTS TO LIVE WITH GRACE, INTEGRITY, AND A REVERENT CONCERN FOR THE WORLD THE SCHOOL OF THEOLOGY EDU

2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	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?
	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 \$ 51,680,214 including grants of \$ 19,777,843 ) (Revenue \$ )
	Instruction - The College of Arts and Sciences offers a challenging and stimulating program in the liberal arts with an emphasis on mastery of fundamental disciplines. Degree requirements are rigorous and extensive, and include comprehensive examinations in major areas of study. Moral and spiritual values are a vital part of the educational experience at Sewanee, both in and outside of the classroom. While non-sectarian in its teaching and recruiting of students and faculty, the College claims its Episcopal heritage and understands that faith and reason are multially enriching. The academic program of the College of Arts and Sciences is aimed at developing the intellect and character of its students to prepare them for lives of service and leadership. The core curriculum represents the faculty's vision of the knowledge, ideas, and values around which the liberal education is structured. A student at Sewanee is expected to grow and mature as a human being, capable of rational analysis and moral discernment and able to give effective expression to his or her ideas. Sewanee's curriculum challenges while it educates. The high expectations placed on students are balanced with the faculty's commitment to personal attention and encouragement. Regardless of major, Sewanee students develop the ability to research, analyze, solve problems, and express themselves. Once described by The New York Times as a "bit of Oxford in Tennessee," Sewanee has an impressive record of academic achievement. Offering 36 majors, 32 minors, and a number of special educational opportunities, the College prepares its students for careers in many fields. Interdisciplinary study, double majors, minors, and concentrations allow students to tailor their own academic experience. The University also offers a 3/2 engineering program with public University, a pre-business and business minor program, and a teacher-training agreement with Peabody College of Education at Vanderbilt University. The university has an exceptionally strong literary traditio
4b	(Code ) (Expenses \$ 10,873,327 including grants of \$ 1,636 ) (Revenue \$ )
. •	Student Services - Undergraduate students at Sewanee are independent-minded and high achieving, attracted to the University by the prospect of intense intellectual engagement with faculty and peers and the opportunity to make meaningful contributions to the community and the broader world. To those ends, a wide range of co-curricular activities are available to inculcate and develop the impetus for leadership. More than 110 clubs, organizations, and social groups provide interaction among the members of the University and the Sewanee community. About 60 percent of the student body joins fraternities or sororities. More than half of Sewanee students are active in some type of community service, and students serve on the Sewanee Volunteer Fire Department and the Sewanee Emergency Medical Service squads. Service is an important part of many students' experience at Sewanee. There are nearly two dozen service organizations on campus, all student-led. Each year, more than 100 students use their Spring Break to serve others in places such as Haiti, Jamaica, Ecuador, Miami, New York City, and New Orleans. The University's version of Habitat for Humanity, known as Housing Sewanee, is now in its 17th year and completed its 15th house in 2009-10 for residents in Sewanee and Franklin County. The University has 11 men's, 12 women's, and 1 coed varsity sport, including football, men's and women's lacrosse, and the equestrian program. More than half of the undergraduates participate in intramural sports including floor hockey, indoor soccer, and basketball. Numerous club level sports, including a very popular rowing program and rugby, have met with success in competition with other institutions. The Sewanee Outing Program was founded to give students guided participation in outdoor activities both on and off the Domain, including rock climbing, rappelling, mountain biking, canoeing, and kayaking It offers students the chance to explore the outdoor environment of the Domain and to develop as outdoor trip leaders.
4c	(Code ) (Expenses \$ 12,964,409 including grants of \$ ) (Revenue \$ )
₩.	Housing and Auxiliary Services - Support services for students, faculty and staff are designed and operated to complement and strengthen the instructional programs of the University All undergraduate students, except married students and those living at home with their families, live in University-approved housing, primarily college residence halls. In keeping with the philosophy of building community among the student body, students are not assigned to residence halls according to class, fratemity or sorority affiliation, athletics, or academic department. STUDENTS CHOOSE FROM AMONG COED OR SINGLE-SEX HALLS, SUBSTANCE-FREE HOUSING IS THE CHOICE AMONG A STEADY NUMBER OF STUDENTS. There are several foreign language houses, and a "Green House," where students live in an

Other program services (Describe in Schedule O ) See also Additional Data for Description
(Expenses \$ 3,879,326 including grants of \$ ) (Revenue \$ )

intentional community focused on sustainable living. Thematic residential choices within residence halls include spaces for students' interestED in performing arts, community service and other activities. Living learning communities are theme-based residence halls where first-year students experience co-curricular and social opportunities that complement the classroom experience. Participation, which is voluntary, connects students and faculty advisors in areas of their intellectual interests and engages students in meaningful relationships and experiences. Research indicates that the living-learning communities are having a salutary effect on retention, academic performance, and student conduct. A sophisticated and comprehensive dining services operation ensures that an array of healthy food choices is available to students. Some food items are produced by local growers, food waste is composted, and care is taken to exercise social responsibility in the purchase of food and in the consumption of energy needed to prepare it and to wash utensils and dishware

le Total program service expenses▶\$ 79,397,276

Part TV	Checklist	t of De	auired	Schadule	_
anu w	CHECKIIS	L UI KE	uuneu	Scheuule	33

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any 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		No
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? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	Į	ļ	
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	Yes	
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	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the 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	Yes	
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		No
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		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
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	
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		Νο
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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	Yes	
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	Yes	
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)			
а	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		Νο
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	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		N o
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		Νο
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		N o
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		N o
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		N o
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		N o
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	
		F	orm <b>990</b>	(2009)

Part V	Statements	Regarding	Other II	RS Filings a	and Tax	Compliance
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			Yes	No
.a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
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?	<b>1</b> c	Yes	
a	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			
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	2b	Yes	
а	Instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
a	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	
Ь	If "Yes," enter the name of the foreign country ▶SP			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
1	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
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		
	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		
	Organizations that may receive deductible contributions under section 170(c).			
	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		Νo
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
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		Νo
J	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> 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		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	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			
	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
a	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 120			

735 UNIVERSITY AVE SEWANEE, TN 373831000

(931) 598-1349

**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.

Se	ction A. Governing Body and Management					
	etton A. Governing Body und Planagement				Yes	No
1a	Enter the number of voting members of the governing body	1a	138			
b	Enter the number of voting members that are independent	1b	134			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?	iness •	relationship with any	2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management coi			3		No
4	Did the organization make any significant changes to its organizational documents sfiled?		·	4		No
5	Did the organization become aware during the year of a material diversion of the orga	anızat	ion's assets?	5		No
6	Does the organization have members or stockholders?			6		No
7a	Does the organization have members, stockholders, or other persons who may elect governing body?	one o	r more members of the	7a		No
ь	Are any decisions of the governing body subject to approval by members, stockhold		rother persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written active year by the following			,,,		
а	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,			- 05	163	
9	organization's mailing address? If "Yes," provide the names and addresses in Sched		· · · · ·	9		Νo
	ction B. Policies (This Section B requests information about policies not	requi	red by the Internal			
Re	venue Code.)					
					Yes	No
	Does the organization have local chapters, branches, or affiliates?	•		10a		No
b	If "Yes," does the organization have written policies and procedures governing the adaffiliates, and branches to ensure their operations are consistent with those of the or	rganız	ation?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing	ng bod	y before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Fo	orm 9	90			
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 to conflicts?		<del>-</del>	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance will describe in Schedule O how this is done			12c	Yes	
13	Does the organization have a written whistleblower policy?			13	Yes	
14	Does the organization have a written document retention and destruction policy? $\ \ .$			14	Yes	
15	Did the process for determining compensation of the following persons include a revi independent persons, comparability data, and contemporaneous substantiation of th					
а	The organization's CEO, Executive Director, or top management official			15a	Yes	
b	Other officers or key employees of the organization			15b	Yes	
	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 of taxable entity during the year?			16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the org participation in joint venture arrangements under applicable federal tax law, and take	en ste	ps to safeguard the			
	organization's exempt status with respect to such arrangements?	•		16b		
	ction C. Disclosure					
17	List the States with which a copy of this Form 990 is required to be filed ►	_				
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable (3)s only) available for public inspection. Indicate how you make these available. Chapter's website.    Own website.   Another's website.					
19	Describe in Schedule O whether (and if so, how), the organization makes its governmenterest policy, and financial statements available to the public See Additional Data					
20	State the name, physical address, and telephone number of the person who possess	es the	books and records of th	e orga	nızatıor	n 🕨
	OFFICE OF THE TREASURER					

#### 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 i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
<b>(A)</b> Name and Title	(B) Average hours	(C) Position (check all that apply)						<b>(D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►34

			Yes	No	
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule <i>J</i> for such individual	3		No	
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				
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 I 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			
MACLACHLAN CORNELIUS FILONI 200 THE BANK TOWER 307 FOURTH AVE PITTSBURGH, PA 15222	CONSTRUCTION SERVICE	461,316			
CAMBRIDGE ASSOCIATES LLC PO BOX 10317 UNIONDALE, NY 11555	INVESTMENT ADVISOR	342,062			
GEORGE CLANTON CONSTRUCTION CO 2621 LEAH CIRCLE COLUMBIA, TN 38401	CONSTRUCTION	412,346			
SANITATION DEPT PO BOX 22 MONTEAGLE, TN 37356	TRASH REMOVAL	240,009			
CHAMBLISS BAHNER STOPHEL PC TWO UNION SQUARE 1000 TALLAN BUILD CHATTANOOGA, TN 37402	ATTORNEYS	211,617			
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					

Page 8

617,093

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
22	1a	Federated campaigns 1a				311
E E	ь	Membership dues 1b				
₽.E	c	Fundraising events 1c				
£ E	d	Related organizations 1d				
5,2	e	Government grants (contributions) 1e 206,286				
Si,	f	All other contributions, gifts, grants, and <b>1f</b> 16,338,969				
불	'	sımılar amounts not ıncluded above				
事品	g	Noncash contributions included in lines 1a-1f \$				
Contributions, gifts, grants and other similar amounts	h	Total. Add lines 1a-1f	16,545,255			
		Business Code				
TI e	2a	TUITION & FEES 611,310	55,771,929	55,771,929		
e Ke	ь	AUX SALES & SERVC 611,310		17,956,251		
o G	c	EDUC SALES & SERV 611,310		2,499,105		
ŽM.	d	611,310	2,499,103	2,499,103		
X						
Ē	e	A II abban na n				
Program Serwce Revenue	f	All other program service revenue				
	g	Total. Add lines 2a-2f	76,227,285			
	3	Investment income (including dividends, interest	6,252,496			6,252,496
	4	and other similar amounts)	0,232,130			5,232,136
	5	Royalties	1,553,230			1,553,230
		(i) Real (ii) Personal				
	6a	Gross Rents				
	ь	Less rental				
	c	expenses Rental income				
		or (loss)  Net rental income or (loss)				
	d	(i) Securities (ii) Other				
	7a	Gross amount 743,906				
		from sales of assets other				
	١.	than inventory Less cost or				
	b	other basis and				
	c	sales expenses Gain or (loss) 743,906				
	d	Net gain or (loss)	743,906			743,906
	8a	Gross income from fundraising				
Ē		events (not including				
₹ >		\$ of contributions reported on line 1c)				
ů.		See Part IV, line 18				
ψ		a				
Other Revenue	b c	Net income or (loss) from fundraising events	0			
_	9a	Gross income from gaming activities	1			
		See Part IV, line 19				
		а				
	b	Less direct expenses b				
	C	Net income or (loss) from gaming activities	0			
	TOA	Gross sales of inventory, less returns and allowances .				
		a				
	ь	Less cost of goods sold <b>b</b>	]			
	С	Net income or (loss) from sales of inventory	0			
		Miscellaneous Revenue Business Code				
	11a					
	ь					
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d	О			
	12	Total revenue. See Instructions				
			101,322,172	76,227,285		8,549,632

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

Δ	Section 501(c)(3) and 501(c)(4) organizations m I other organizations must complete column (A) but are not required to			(D)	
Do no	t include amounts reported on lines 6b, 9, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0	·		· · · · · · · · · · · · · · · · · · ·
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	19,670,403	19,670,403		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	109,076	109,076		
4	Benefits paid to or for members	0		1	
5	Compensation of current officers, directors, trustees, and key employees	2,096,692	815,043	1,128,249	153,400
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	31,233,434	25,007,532	5,187,827	1,038,075
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,903,347	2,292,847	610,500	
9	Other employee benefits	5,707,214	4,448,574	894,631	364,009
10	Payroll taxes	2,036,194	1,593,757	442,437	
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	428,872	34,866	388,798	5,208
c	Accounting	43,800	5,150	38,650	
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	1,889,656		1,889,656	
g	Other	8,397,229	7,484,936	826,347	85,946
12	Advertising and promotion	487,429	368,451	118,439	539
13	Office expenses	1,523,690	1,186,207	237,945	99,538
14	Information technology	1,052,382	638,415	410,198	3,769
15	Royalties	25,949	16	25,933	
16	Occupancy	854,777	725,374	102,789	26,614
17	Travel	2,035,102	1,530,223	440,117	64,762
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	257,856	220,010	34,937	2,909
20	Interest	1,594,643	1,594,643		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	3,848,480	3,431,484	416,996	
23 24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of	693,968	406,925	280,518	6,525
	total expenses shown on line 25 below )				
a	UTILITIES	2,742,135	2,689,823	52,312	
Ь	FOOD	1,531,912	1,274,104	227,746	30,062
c	RENEWALS & REPLACEMENTS	3,544,790	2,075,531	1,467,855	1,404
d	EQUIP RENTAL, MAINT, & LEASES	409,258	330,398	63,225	15,635
e	MISC	1,997,454	1,463,488	533,966	
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	97,115,742	79,397,276	15,820,071	1,898,395
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				

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			348,518	1	2,314,724
	2	Savings and temporary cash investments			50,203,526	2	48,220,262
	3	Pledges and grants receivable, net			34,584,800	3	35,334,690
	4	Accounts receivable, net			764,942	4	871,851
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of					
		Schedule L	88,890	5	97,933		
	6	Receivables from other disqualified persons (as defined under spersons described in section 4958(c)(3)(B) Complete Part II					
		Schedule L				6	
ssets	7	Notes and loans receivable, net			3,247,992	7	3,051,209
8	8	Inventories for sale or use			612,939	8	476,827
⋖	9	Prepaid expenses and deferred charges			535,927	9	454,473
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	201,811,305			
	ь	Less accumulated depreciation	10b	68,078,827	127,124,067	10c	133,732,478
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11			234,552,742	12	263,209,989
	13	Investments—program-related See Part IV, line 11				13	_
	14	Intangible assets			6,392,858	14	6,185,087
	15	Other assets See Part IV, line 11				15	
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .			458,457,201	16	493,949,523
	17	Accounts payable and accrued expenses .			9,448,360	17	9,168,000
	18	Grants payable				18	
	19	Deferred revenue			1,551,835	19	1,684,940
	20	Tax-exempt bond liabilities			39,601,415	20	42,242,937
<u>, o</u>	21	Escrow or custodial account liability Complete Part IV of Schedu	le D			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	/				
ï		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties	s .			23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			7,233,199	25	7,689,636
	26	Total liabilities. Add lines 17 through 25			57,834,809	26	60,785,513
ري دان		Organizations that follow SFAS 117, check here 🕨 🔽 and com	plet e l	lines 27			
uc.		through 29, and lines 33 and 34.			145 724 747		160,588,550
<u>ರ</u> ಕ	27	Unrestricted net assets			145,734,747		
<u> </u>	28	Temporarily restricted net assets			130,322,178		140,091,057
Fund Balance	29	Permanently restricted net assets			124,565,467	29	132,484,403
FI		Organizations that do not follow SFAS 117, check here ► allines 30 through 34.	na con	npiete			
or,	30	Capital stock or trust principal, or current funds	_			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
25.5	32	Retained earnings, endowment, accumulated income, or other fi				32	
Net /	33	Total net assets or fund balances			400,622,392	33	433,164,010
ž	34	Total liabilities and net assets/fund balances			458,457,201	34	493,949,523
ı		Total habilities and net assets/land balances			1 450,457,201	54	

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

Form **990** (2009)

**Employer identification number** 

### OMB No 1545-0047

Inspection

### **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization THE UNIVERSITY OF THE SOUTH

Department of the Treasury Internal Revenue Service

h

# **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.

62-0475697

Part	29	<b>Reason for Public Charity Status</b> (All organizations must complete this part.) See instructions
he or	ganız	zation is not a private foundation because it is (For lines 1 through 11, check only one box )
1	Γ	A church, convention of churches, or association of churches section 170(b)(1)(A)(i).
2	굣	A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E )
3	$\sqcap$	A hospital or a cooperative hospital service organization described in <b>section 170(b)(1)(A)(iii).</b>
4	Γ	A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state
5	Γ	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
6	$\sqcap$	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7	Γ	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	$\overline{}$	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)
9	<u></u>	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 )
.0	$\vdash$	An organization organized and operated exclusively to test for public safety Seesection 509(a)(4).
1	r	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). Chec 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	Γ	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 $509(a)(2)$

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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the

following persons? (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? (ii) a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above?

Provide the following information about the supported organization(s)

	Yes	No
11g(	i)	
<b>11</b> g(i	ii)	
11g(i	ii)	

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizati col (i) list your gove docume	e ion in ted in rning	(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organizati col (i) orga	on in inized	(vii) A mount of support?
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	֥ <i>)</i>		
	endar year (or fiscal year beginning	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	( <b>b)</b> 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	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) <b>Dublic Support</b> Subtract line F from						
6	<b>Public Support.</b> Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	( <b>b</b> ) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	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						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and <b>stop here</b>						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
<b>_</b>	and <b>stop here.</b> The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	<b>▶</b> □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and <b>stop here.</b> The organization				,		▶
17a	10%-facts-and-circumstances test-	<b>-2009.</b> If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						<b>▶</b> ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

**▶**□

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support				1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	(e) 2009	<b>(f)</b> 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						
3	purpose Gross receipts from activities that				+		
3	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	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	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						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6 )						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	( <b>d)</b> 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
	business activities not included						
	ın lıne 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,						
14	11 and 12 ) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and <b>stop here</b>	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	<b>▶</b> ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	<b>009</b> (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	<b>2008</b> Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind <b>stop here.</b> T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes here	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(	us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

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

Schedule A (Form 990 or 990-EZ) 2009

### **Additional Data**

Software ID: Software Version:

**EIN:** 62-0475697

Name: THE UNIVERSITY OF THE SOUTH

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

4d. Other program	services				
(Code OPERATIONS & M	) (Expenses \$ AINTENANCE OF PLANT	3,559,855	including grants of \$	) (Revenue \$	)
(Code RESEARCH	) (Expenses \$	319,471	including grants of \$	) (Revenue \$	)

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per	Posi t	(( tion ( hat a	che	)	_		( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
The Rt Rev Henry N Parsley Jr Board Member	2 0	Х						0	0	0
The Rt Rev John McKee Sloan Board Member	2 0	Х						0	0	0
The Rev Susan Sloan Board Member	2 0	Х						0	0	0
Cornelia Heflin Board Member	2 0	Х						0	0	0
W Charles Mayer III Board Member	2 0	Х						0	0	0
The Rt Rev Larry R Benfield Board Member	2 0	Х						0	0	0
The Rev Canon Dr Dennis G Campbell Board Member	2 0	Х						0	0	0
Pan Adams-McCaslin Board Member	2 0	Х						0	0	0
Lında Walker Board Member	2 0	Х						0	0	0
The Rt Rev J Neil Alexander CHANCELLOR	2 0	Х						0	0	0
The Rev C Dean Taylor Board Member	2 0	Х						0	0	0
Steve Burnett Board Member	2 0	Х						0	0	0
John Ford Board Member	2 0	Х						0	0	0
The Rt Rev John W Howe III Board Member	2 0	Х						0	0	0
The Rev Dr John R Jacobs Board Member	2 0	Х						0	0	0
Parker Bauer Board Member	2 0	Х						0	0	0
Frank B Gummey III Board Member	2 0	Х						0	0	0
The Rt Rev Philip M Duncan II Board Member	2 0	Х						0	0	0
The Rev John R Riggin Board Member	2 0	Х						0	0	0
Amy Hamilton Board Member	2 0	Х						0	0	0
Scott Remington Board Member	2 0	Х						0	0	0
The Rt Rev James M Stanton Board Member	2 0	Х						0	0	0
The Rt Rev Paul E Lambert Board Member	2 0	Х						0	0	0
The Rev Robert M Corley Board Member	2 0	Х						0	0	0
Brownie Watkins Board Member	2 0	Х						0	0	0

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per	Posi t	(( tion ( hat a	che	')	_		( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Dan Wilson Board Member	2 0	Х						0	0	0
The Rt Rev Clifton Daniel III Board Member	2 0	Х						0	0	0
The Rev John Carlisto Board Member	2 0	Х						0	0	0
Robert Overman Board Member	2 0	Х						0	0	0
Daniel Stroud Board Member	2 0	Х						0	0	0
The Rt Rev Charles G vonRosenberg Board Member	2 0	Х						0	0	0
The Rev Dr Hugh B Jones Board Member	2 0	Х						0	0	0
Lee Phillips Board Member	2 0	Х						0	0	0
Robert G Norred Jr Board Member	2 0	Х						0	0	0
The Rt Rev Samuel Johnson Howard Board Member	2 0	Х						0	0	0
The Rev Dr Nancee Martin Coffey Board Member	2 0	Х						0	0	0
Pamela Jordan Anderson Board Member	2 0	Х						0	0	0
Blutcher B Lines Board Member	2 0	Х						0	0	0
The Rt Rev C Wallis Ohl Board Member	2 0	Х						0	0	0
The Rev Vernon Gotcher Board Member	2 0	Х						0	0	0
Kent Henning Board Member	2 0	Х						0	0	0
Sherrı Glaser Board Member	2 0	Х						0	0	0
The Rt Rev Scott A Benhase Board Member	2 0	Х						0	0	0
The Very Rev Robert Fain Board Member	2 0	Х						0	0	0
William R Bruce Board Member	2 0	Х						0	0	0
Deborah Thomas Board Member	2 0	Х						0	0	0
The Rt Rev Edwin F Gulick Board Member	2 0	Х						0	0	0
The Very Rev Mark Bourlakas Board Member	2 0	Х						0	0	0
James McGinley Mac Jefferson Board Member	2 0	Х						0	0	0
Leslie Newman Board Member	2 0	Х						0	0	0

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per		tion ( that a	che	′)			( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation	
	week	Individual trustee or director	Institutional Trustee	Officei	Former Highest compensated employee Key employee		Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
The Rt Rev Stacey Sauls Board Member	2 0	х						0	0	0	
The Rev Michael Carlisle Board Member	2 0	х						0	0	0	
Addison Hosea Board Member	2 0	×						0	0	0	
Robert Ross Board Member	2 0	×						0	0	0	
The Rt Rev Morris K Thompson Jr Board Member	2 0	х						0	0	0	
The Rev Ralph Howe Jr Board Member	2 0	х						0	0	0	
Edward F Harold Board Member	2 0	Х						0	0	0	
Drew Broach Board Member	2 0	х						0	0	0	
The Rt Rev Duncan M Gray III Board Member	2 0	х						0	0	0	
The Rev David Elliott III Board Member	2 0	х						0	0	0	
Scott Davis Board Member	2 0	х						0	0	0	
Margaret McLarty Board Member	2 0	х						0	0	0	
The Rt Rev George Wayne Smith Board Member	2 0	Х						0	0	0	
The Rev Llewellyn M Heigham Jr Board Member	2 0	Х						0	0	0	
Kırby Colson Board Member	2 0	х						0	0	0	
Judith Lynn Bandy Stupp Board Member	2 0	х						0	0	0	
The Rt Rev Michael Bruce Currey Board Member	2 0	х						0	0	0	
The Rev Samuel Gregory Jones Board Member	2 0	х						0	0	0	
Jonathan Engram Board Member	2 0	х						0	0	0	
Robert L Husted Board Member	2 0	х						0	0	0	
The Rt Rev J Scott Mayer Board Member	2 0	Х						0	0	0	
The Rev Patricia G Russell Board Member	2 0	Х						0	0	0	
Don Griffis Board Member	2 0	Х						0	0	0	
Sally Manning Board Member	2 0	Х						0	0	0	
The Rt Rev Mark J Lawrence Board Member	2 0	х						0	0	0	

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per		tion ( that a	che				( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation	
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
The Rev Dr John MacReadie Barr III Board Member	2 0	Х						О	О	0	
William Clarkson Board Member	2 0	Х						0	0	0	
Elizabeth Lewis Board Member	2 0	x						0	0	0	
The Rt Rev Leopold Frade Board Member	2 0	Х						0	0	0	
The Rev Richard J Aquilar Board Member	2 0	Х						0	0	0	
Mıchael Baılıff Board Member	2 0	Х						0	0	0	
Edmund T Henry III Board Member	2 0	Х						0	0	0	
The Rt Rev Dabney T Smith Board Member	2 0	Х						0	0	0	
The Rev Kyle Bennett Board Member	2 0	Х						0	0	0	
David Dunn-Rankin Board Member	2 0	Х						0	0	0	
Heather Whelan Board Member	2 0	Х						0	0	0	
The Rt Rev John C Bauerschmidt Board Member	2 0	Х						0	0	0	
The Rev Leigh Spruill Board Member	2 0	Х						0	0	0	
H E Miller Jr Board Member	2 0	Х						0	0	0	
W A Stringer Board Member	2 0	Х						0	0	0	
The Rt Rev C Andrew Doyle Board Member	2 0	Х						0	0	0	
The Rt Rev Rayford High Board Member	2 0	Х						0	0	0	
The Rt Rev Dena Harrison Board Member	2 0	Х						0	0	0	
The Rev William C Treadwell Board Member	2 0	Х						0	0	0	
William A Gage Jr Board Member	2 0	Х						0	0	0	
Sandra Pratt Wilkens Board Member	2 0	Х						0	0	0	
The Rt Rev Andrew Waldo Board Member	2 0	Х						0	0	0	
The Rev Dr Nicholas M Beasley Board Member	2 0	Х						0	0	0	
L David Condon Board Member	2 0	Х						0	0	0	
Mildred Lee Tanner Board Member	2 0	Х						0	0	0	

Compensated Employees, and Independent Contractors											
<b>(A)</b> Name and Title	(B) Average hours per	Posi t	(( tion ( hat a	che	')		1	( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation	
	week	Individual trustee or director	Highest compensated employee  Key employee  Officer  Institutional Trustee		Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations			
The Rt Rev Don E Johnson Board Member	2 0	х						0	0	0	
The Rev Robert L Van Doren Jr Board Member	2 0	Х						0	0	0	
Robert D Gooch Jr Board Member	2 0	Х						0	0	0	
Bruce Steinhauer Board Member	2 0	×						0	0	0	
The Rt Rev Gary R Lillibridge Board Member	2 0	Х						0	0	0	
The Rt Rev David Mitchell Reed Board Member	2 0	Х						0	0	0	
The Rev Michael Hoffman Board Member	2 0	Х						0	0	0	
Kathleen Foster Board Member	2 0	Х						0	0	0	
Amy Hoffman Board Member	2 0	Х						0	0	0	
The Rt Rev D Bruce MacPherson Board Member	2 0	Х						0	0	0	
The Rev Paul D Martin Board Member	2 0	Х						0	0	0	
Andrea Marie Petrosh Board Member	2 0	Х						0	0	0	
Francis Foote Manning Board Member	2 0	Х						0	0	0	
The Rt Rev G Porter Taylor Board Member	2 0	Х						0	0	0	
The Rev Lawrence Britt Board Member	2 0	Х						0	0	0	
Kemper Brown Board Member	2 0	Х						0	0	0	
Bıll Stiefel Jr Board Member	2 0	Х						0	0	0	
Montague Cosmo Boyd Board Member	2 0	Х						0	0	0	
The Rev John Runkle Board Member	2 0	Х						0	0	0	
Lane Williams Board Member	2 0	Х						0	0	0	
Edwin Williamson Board Member	2 0	Х						0	0	0	
Craig S Wilson Board Member	2 0	Х						0	0	0	
Margaret Mankın Barton Board Member	2 0	Х						0	0	0	
Julian Bibb Board Member	2 0	Х						0	0	0	
Jay Faires Board Member	2 0	х						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		tion ( hat a	che	)			(D) Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation	
	week	individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
The Rev Emily Bar Richards Board Member	2 0	х						0	0	0	
Scott Thompson Board Member	2 0	Х						0	0	0	
Charles Brock Board Member	2 0	Х						0	0	0	
Elizabeth Finch Board Member	2 0	х						0	0	0	
Harold Rahn Board Member	2 0	Х						0	0	0	
Gregg Robertson Board Member	2 0	Х						0	0	0	
David Shipps Board Member	2 0	Х						0	0	0	
The Rev Doris Westfall Board Member	2 0	Х						0	0	0	
Nancy Berner Board Member	2 0	Х						0	0	0	
Cynthia S Crysdale Board Member	2 0	Х						0	0	0	
John Willis Board Member	2 0	Х						0	0	0	
Carrie Ryan Board Member	2 0	Х						0	0	0	
Caroline Tanner Board Member	2 0	Х						0	0	0	
Dr Joel L Cunningham Vice-Chancellor & President	40 0			х				280,966	0	75,847	
John Gatta Dean of College	40 0			х				172,546	0	17,215	
Linda Lankewicz Provost	40 0			х				169,715	0	23,582	
Jerry Forster Treasurer/CFO	40 0			х				157,018	0	64,128	
Robert W Pearigen VP University Relations	40 0			х				154,486	0	48,625	
Donna Pierce Legal Counsel & HR Director	40 0			х				145,681	0	46,885	
Eric E Hartman Dean of Students	40 0			х				112,013	0	21,101	
William S Stafford  Dean of Theology	40 0			х				111,068	0	38,856	
Jett M Jay Fisher Jr Interim Dir of Admissions	40 0			х				105,036	0	101,902	
David Lesesne Director of Adminissions	40 0			х				100,561	0	14,877	
Paul Wiley Secretary	40 0			х				95,736	0	20,045	
Eugene Prunty Professor Writers Conf Direct	40 0					×		170,523	0	32,649	

<b>(A)</b> Name and Title	(B) (C) Average Position (check all hours that apply) per				( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation					
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
Frederick Croom Professor	40 0					х		159,497	0	33,758		
John Reishman Professor	40 0					Х		142,931	0	27,639		
Yasmeen Mohiuddin Professor	40 0					х		136,114	0	20,362		
Gerald Smith Professor	40 0					х		134,249	0	29,622		

### 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
UTILITIES	2,742,135	2,689,823	52,312	
FOOD	1,531,912	1,274,104	227,746	30,062
RENEWALS & REPLACEMENTS	3,544,790	2,075,531	1,467,855	1,404
EQUIP RENTAL, MAINT, & LEASES	409,258	330,398	63,225	15,635
MISC	1,997,454	1,463,488	533,966	

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DLN: 93493136066161

OMB No 1545-0047

Open to Public

## **SCHEDULE D**

(Form 990)

Department of the Treasury

**Supplemental Financial Statements** 

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

rnal	Revenue Service	► Attach to Fo	orm 990. ► See separate instructions.			Inspection		
	me of the organia			Emp	loyer identifica	tion numb	er	
ПС	ONIVERSITY OF THE	E 500TH		62-	0475697			
Pa			dvised Funds or Other Similar Fo	unds	or Accounts	. Comple	te if the	
	organiz	ation answered "Yes" to Form 99	· · · · · · · · · · · · · · · · · · ·		(h) Funds and s	tharacca	ınto	
	Total number at	and of year	(a) Donor advised funds	'	( <b>b)</b> Funds and o	other accor	ints	
		ributions to (during year)						
		ts from (during year)						
	Aggregate value	, ,						
	_		sors in writing that the assets held in don organization's exclusive legal control?	oradv	sed	☐ Yes	∏ No	
	used only for cl	· · · · · · · · · · · · · · · · · · ·	donor advisors in writing that grant funds efit of the donor or donor advisor, or for ar			☐ Yes	┌ No	
aı	tt III Consei	rvation Easements. Complete	ıf the organızatıon answered "Yes" to	o Forn	n 990, Part I\	/, line 7.		
	Protection Preservation Complete lines	of natural habitat on of open space	on or pleasure) Preservation of an Preservation of a conservation contribution in the form	ertifie	d historic struc		ea	
					Held at the	End of the	e Year	
а	Total number o	f conservation easements		2a			2	
b	Total acreage r	estricted by conservation easements		2b			3,208 00	
С	Number of cons	servation easements on a certified his	toric structure included in (a)	2c				
d	Number of cons	servation easements included in (c) ac	equired after 8/17/06	2d				
	Number of cons	ervation easements modified, transfe	rred, released, extinguished, or terminate	d by th	ie organization	during		
	the taxable yea	ar ▶						
	Number of state	es where property subject to conserva	ation easement is located 🛌 👤 1					
		nization have a written policy regarding the conservation easements it holds?	g the periodic monitoring, inspection, hand	dling of	violations, and	√ Yes	┌ No	
	Staff and volun	teer hours devoted to monitoring, insp	ecting and enforcing conservation easem	ents d	uring the year l		00	
	A mount of expe	enses incurred in monitoring, inspecti	ng, and enforcing conservation easements	durin	g the year 🟲 🕏 .	16,0	43	
		servation easement reported on line 2 i and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion		☐ Yes	∏ No	
	balance sheet,		onservation easements in its revenue and the footnote to the organization's financial nents					
ar			ns of Art, Historical Treasures, 'Yes" to Form 990, Part IV, line 8.	or Ot	her Similar	Assets.		
а	art, historical t	reasures, or other similar assets held	116, not to report in its revenue stateme for public exhibition, education or researc ancial statements that describes these it	h ın fu			e,	
b	historical treas	·	116, to report in its revenue statement a public exhibition, education, or research ii			•		
	(i) Revenues in	ncluded in Form 990, Part VIII, line 1			<b>►</b> \$			
	(ii) Assets incl	uded in Form 990, Part X			<b>►</b> \$			
	If the organizat	,	orical treasures, or other similar assets fo S 116 relating to these items	r finan	cıal gaın, provi	de the		
а	Revenues inclu	ided in Form 990, Part VIII, line 1			<b>▶</b> \$			

Assets included in Form 990, Part X

3	Using the organization's accession and othe										ontinuea)
,	items (check all that apply)	records, check any	y Oi ti	16 1011	owing the	at air	e a sigillica	111 0	ise of its confecti	011	
а	Public exhibition		d	Г	Loan or	excl	nange progr	ams			
b	Scholarly research		e	$\sqcap$	Other						
С	✓ Preservation for future generations										
4	Provide a description of the organization's co Part XIV	ollections and expla	ın hov	w the	y further	the o	rganızatıon	's e	xempt purpose in		
5	During the year, did the organization solicity assets to be sold to raise funds rather than t									Yes	✓ No
Pai	Part IV, line 9, or reported an ar	<b>ements.</b> Comple	ete ıf	the	organiza	atıor			es" to Form 99	90,	<u> </u>
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	ıan or other ınterme	diary	for c	ontributio	ons c	or other ass	ets	not 「	Yes	✓ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	/ıng ta	able		Г		A me	ount	
c	Beginning balance						-	1c	Am	June	
d	Additions during the year						F	1d			
e	Distributions during the year						<b></b>	1e			
f	Ending balance						<u> </u>	1f			
2a	Did the organization include an amount on Fo	orm 990 Part V line	212				L		Г	Yes	
	If "Yes," explain the arrangement in Part XI\		c 2 I ·						'	163	, 140
	rt V Endowment Funds. Complete		n ans	were	od "Yes"	' to I	Form 990	Pai	rt IV line 10		
	Endownent Fundor Comprete	(a)Current Year		Prior						(e)Four `	Years Back
1a	Beginning of year balance	246,098,443		313	3,206,187						
b	Contributions	11,241,702		(	6,418,592						
c	Investment earnings or losses	28,421,915		-60	0,013,539						
d	Grants or scholarships	5,498,353		ļ.	5,593,100						
e	Other expenditures for facilities and programs	7,776,224		·	7,919,697						
f	Administrative expenses										
g	End of year balance	272,487,483		246	5,098,443						
2	Provide the estimated percentage of the yea	r end balance held a	s								
а	Board designated or quasi-endowment 🕨	21.000 %									
Ь	Permanent endowment F 79.000 %										
c	Term endowment ▶										
3a	Are there endowment funds not in the posse organization by	ssion of the organiza	ation	that a	are held a	and a	dmınıstered	l for	the	Yes	No
	(i) unrelated organizations								3a(i	) Yes	
	(ii) related organizations								3a(ii	)	No
b	If "Yes" to 3a(II), are the related organizatio							•	Зь		
4	Describe in Part XIV the intended uses of th										
Pa	t VI Investments—Land, Building	s, and Equipme	nt. S			$\neg$					
	Description of investment				Cost or oth		(b)Cost or ot basis (other		(c) Accumulated depreciation	( <b>d)</b> Bo	ook value
1a	Land		•				10,859	.058		:	10,859,058
b	Buildings				1,832,2	204	140,456	973	38,631,967	10	03,657,710
c	Leasehold improvements										
d	Equipment						39,626	898	29,447,360		10,179,538
	Other		•				9,036	172			9,036,172
Tota	<b>l.</b> Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colur	nn (B,	), line	10(c).)				▶	13	33,732,478
									Schedule D	(Form 9	990) 2009

Part VII Investments—Other Securities. See F  (a) Description of security or category		(c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests Other		
EQUITIES	197,446,426	
BONDS	44,924,583	
CASH VALUE OF LIFE INSURANCE	1,126,884	
ASSETS HELD IN OUTSIDE TRUSTS	19,712,096	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)  Part VIII Investments—Program Related. See	263,209,989	12
		(c) Method of valuation
(a) Description of investment type	( <b>b)</b> Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )		
Part IX Other Assets. See Form 990, Part X, lin  (a) Description		(b) Book value
(2)		(2)
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X,		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes  REFUNDABLE ADVANCES	, line 25. (b) A mount 0 2,761,851	
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	, line 25. (b) A mount	<b>.</b>
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes  REFUNDABLE ADVANCES	, line 25. (b) A mount 0 2,761,851	
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes  REFUNDABLE ADVANCES	, line 25. (b) A mount 0 2,761,851	
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes  REFUNDABLE ADVANCES	, line 25. (b) A mount 0 2,761,851	
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes  REFUNDABLE ADVANCES	, line 25. (b) A mount 0 2,761,851	
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes  REFUNDABLE ADVANCES	, line 25. (b) A mount 0 2,761,851	
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes  REFUNDABLE ADVANCES	, line 25. (b) A mount 0 2,761,851	
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes  REFUNDABLE ADVANCES	, line 25. (b) A mount 0 2,761,851	
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes  REFUNDABLE ADVANCES	, line 25. (b) A mount 0 2,761,851	
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes  REFUNDABLE ADVANCES	, line 25. (b) A mount 0 2,761,851	
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes  REFUNDABLE ADVANCES	, line 25. (b) A mount 0 2,761,851	
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes  REFUNDABLE ADVANCES	, line 25. (b) A mount 0 2,761,851	

Pal	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	ILS	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	101,322,172
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	97,115,742
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	4,206,430
4	Net unrealized gains (losses) on investments	4	28,335,188
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	28,335,188
10		10	32,541,618
	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9  t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		· · ·
1	Total revenue, gains, and other support per audited financial statements	1	109,724,502
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	-	105,721,302
a	Net unrealized gains on investments		
ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	10,291,986
3	Subtract line <b>2e</b> from line <b>1</b>	3	99,432,516
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		99,432,310
a	Investment expenses not included on Form 990, Part VIII, line 7b. 4a 1,889,656		
b	Other (Describe in Part XIV) 4b		
	Add lines 4a and 4b	4c	1,889,656
с 5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	1,889,636
	Reconciliation of Expenses per Audited Financial Statements With Expenses		<u> </u>
1	Total expenses and losses per audited financial	, per	77,182,884
_	statements	1	,,,102,00
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines <b>2a</b> through <b>2d</b>	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	77,182,884
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 1,889,656		
b	Other (Describe in Part XIV)	]	
c	Add lines <b>4a</b> and <b>4b</b>	4c	19,932,858
•			
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18 )	5	97,115,742

Ident if ier	Return Reference	Explanation
SCHEDULE D	PART XII LINE 2D	SCHOLARSHIP EXPENSE NETTED AGAINST TUITION REVENUE ON FINANCIAL STATEMENTS \$(18,043,202)
SCHEDULE D	PART XIII LINE 4B	SCHOLARSHIP EXPENSE NETTED AGAINST TUITION REVENUE ON FINANCIAL STATEMENTS \$18,043,202
SCHEDULE D	PART III LINE 4	THE UNIVERSITY COLLECTS WORKS OF ART, HISTORICAL TREASURES, AND SIMILAR ASSETS WHICH REFLECT THE HISTORY OF THE INSTITUTION AND/OR SUPPORT ITS EDUCATIONAL PURPOSE THE COLLECTIONS ARE MAINTAINED FOR PUBLIC EXHIBITION, EDUCATION AND RESEARCH IN FURTHERANCE OF PUBLIC SERVICE RATHER THAN FOR FINANCIAL GAIN COLLECTIONS ARE PROTECTED, KEPT UNENCUMBERED, CARED FOR, AND PRESERVED AS A MATTER OF POLICY, THE PROCEEDS OF ITEMS IN COLLECTIONS THAT ARE SOLD ARE USED TO ACQUIRE OTHER ITEMS FOR COLLECTIONS
SCHEDULE D	PART III LINE 1A	THE UNIVERSITY DOES NOT INCLUDE EITHER THE COST OR THE VALUE OF ITS COLLECTIONS ON THE STATEMENT OF FINANCIAL POSITION, NOR DOES IT RECOGNIZE GIFTS OF COLLECTION ITEMS AS REVENUES IN THE STATEMENT OF ACTIVITIES THE PROCEEDS FROM ITEMS DISPOSED OF ARE REPORTED AS INCREASES IN THE APPROPRIATE CLASS OF NET ASSETS IN THE STATEMENT OF ACTIVITIES CONTRIBUTED WORKS OF ART, HISTORICAL TREASURES, AND SIMILAR ASSETS THAT ARE NOT ADDED TO COLLECTIONS ARE REPORTED AS ASSETS HELD FOR SALE ON THE STATEMENTS OF FINANCIAL POSITION AT THEIR FAIR MARKET VALUES AT THE DATE OF THE GIFT
SCHEDULE D	PART V LINE 4	ENDOWMENT FUNDS ARE HELD IN PERPETUITY AND THE EARNINGS ARE USED FOR PURPOSES DESIGNATED BY DONORS IN GIFT AGREEMENTS THESE PURPOSES INCLUDE, BUT ARE NOT LIMITED TO STUDENT FINANCIAL AID, INTERNSHIPS, FACULTY SUPPORT, FACILITIES, MAINTENANCE, AND OPERATIONS
SCHEDULE D	PART II LINE 9	CONSERVATION EASEMENT(S) ARE NOT REFLECTED IN THE BALANCE SHEET, INCIDENTAL EXPENSES REFERENCED IN SCHEDULE D PART II, LINE 7 FLOW THROUGH ON THE STATEMENT OF ACTIVITIES
SCHEDULE D	PART X LINE 2	THE UNIVERSITY ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS BASED ON A MORE LIKELY THAN NOT THRESHOLD TO THE RECOGNITION OF THE TAX POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION UNDER EXAMINATION BY THE APPLICABLE TAXING AUTHORITY IF A TAX POSITION OR POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE UNRECOGNIZED TAX BENEFIT IS ESTIMATED BASED ON THE CUMULATIVE PROBABILITY ASSESSMENT THAT AGGREGATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN TAX POSITIONS TAX POSITIONS FOR THE UNIVERSITY INCLUDE, BUT ARE NOT LIMITED TO, THE TAX EXEMPT STATUS AND DETERMINATION OF WHETHER INCOME IS SUBJECT TO UNRELATED BUSINESS INCOME TAX, HOWEVER, THE UNIVERSITY HAS DETERMINED THAT SUCH TAX POSITIONS DO NOT RESULT IN AN UNCERTAINTY REQUIRING RECOGNITION

Employer identification number

### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

THE UNIVERSITY OF THE SOUTH

## **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

	62-0475697			
			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 UNIVERSITY DRAWS A LARGE PERCENTAGE OF ITS STUDENTS FROM A LARGE GEOGRAPHIC SECTION THE UNIVERSITY FOLLOWS A RACIALLY NONDISCRIMINATORY POLICY AND INCLUDES APPROPRIATE STATEMENTS IN ITS RECRUITING, ADMISSIONS, AND SCHOLARSHIP BROCHURES AND CATALOGUES			
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
С	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)			
		1		
		-		
	Does the organization discriminate by race in any way with respect to	l _		
а	Students' rights or privileges?	5a		No
ь	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5с		Νo
	Scholarships or other financial assistance?	l		
u	Scholarships of other infancial assistance?	5d		No
е	Educational policies?	5e		No
f	Use of facilities?	5f		Νo
q	Athletic programs?	5g		No
_				110
h	Other extracurricular activities?	5h		Νo
	If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990)			
		-		
		-		
6-	Does the organization receive any financial aid or assistance from a governmental agency?	- 6a	Yes	
	, Has the organization's right to such aid ever been revoked or suspended?	6b	162	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 CB 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form 990)	7	Yes	

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As Filed Data -

DLN: 93493136066161

OMB No 1545-0047

2009

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

### Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Open to Public **Inspection** 

Name of the organization Employer identification number THE UNIVERSITY OF THE SOUTH 62-0475697 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed) (d) Activities conducted in (e) If activity listed in (d) (f) Total expenditures (a) Region (b) Number of (c) Number of region (by type) (ie, is a program service, for region fundraising, program services, offices in the employees or describe specific type of grants to recipients located in agents in region region service(s) in region the region) South Asia 0 1 Program Services INSTRUCTION 21,695 East Asia and the Pacific 0 1 Program Services INSTRUCTION 79,008 610,384 Europe (Including Iceland and 1 2 Program Services INSTRUCTION Greenland)

Totals . . . .

711,087

Part	IV, line 15, for an		eived more than \$5,	ies Outside the Ur ,000. Check this box				
(a) Name of organization		(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total tax-exemp	number of recipion	ent organizations lis for which the grante	ted above that are e or counsel has pr	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►	
3 Enter total	number of other	organizations or en	tities					- (Farm 000) 2000

Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (d) A mount of (a) Type of grant or (b) Region (e) Manner of cash (f) A mount of (g) Description (h) Method of of non-cash valuation assistance recipients cash grant disbursement non-cash assistance assistance (book, FMV, appraisal, other) SCHOLARSHIP South Asia 1,000 CREDIT TO AR 1 East Asia/Pacific SCHOLARSHIP 4,100 CREDIT TO AR 1 10 103,976 CREDIT TO AR SCHOLARSHIP Europe/Iceland/Greenland

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Schedule F (Form 990) 2009

Complete this part	to provide the information required	d in Part I, line 2, and any additional information.
Identifier	ReturnReference	Explanation
SCHOLARSHIPS TO US INDIVIDUALS FOR FOREIGN ACTIVITY	FORM 990, SCHEDULE F, PART I, LINE 2	SCHOLARSHIP AWARDS ARE CREDITED TO THE STUDENTS' ACCOUNTS RECEIVABLE AT THE UNIVERSITY OF THE SOUTH CREDIT IS APPLIED DIRECTLY AGAINST TUITION AND FEES CHARGED TO THE STUDENT FOR SUMMER ABROAD PROGRAMS AND ONE SEMESTER ABROAD PROGRAM

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DLN: 93493136066161 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

### **Grants and Other Assistance to Organizations, Governments and Individuals in the United States**

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

Open to Public

Name of the organization						Employer identifica	ition number
THE UNIVERSITY OF	THE SOUTH					62-0475697	
Part I Genera	l Information on G	irants and Assistance					
the selection cri  Describe in Part	teria used to award the IV the organization's p	to substantiate the amount of grants or assistance? rocedures for monitoring the us	se of grant funds in the				√ Yes ┌ I
Form 99	0, Part IV, line 21 fo	nce to Governments and r any recipient that receive rm 990) if additional space	d more than \$5,000	. Check this box if n	io one recipient receiv	ed more than \$5,00	0. Use
(a) Name and addre organization or government		(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
2 Enter total numb	er of section 501(c)(3)	and government organizations					
		S					

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

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	( <b>c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
SCHOLARSHIPS-STUDENTS ENROLLED AT UNIV OF THE SOUT	1085	19,779,479			
See Additional Data Table					

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

Identifier

Return Reference

PART I LINE 2

MERIT-BASED SCHOLARSHIPS AND NEED-BASED SCHOLARSHIPS AWARDED TO ENROLLED STUDENTS ARE CREDITED TO THE STUDENTS' ACCOUNT TO COVER TUITION AND FEES GRADE REPORTS ARE GENERATED FOR EACH TERM AND EACH INDIVIDUAL STUDENT IS REVIEWED TO INSURE THEY ARE MAKING SATISFACTORY ACADEMIC PROGRESS TO MAINTAIN THEIR GRANT/SCHOLARSHIP FUNDING NOTIFICATIONS ARE SENT BY THE DEAN OF THE COLLEGE TO ALERT DEPARTMENTS OF WITHDRAWALS IN ADDITION, FINANCIAL AID RUNS ENROLLMENT REPORTS EACH TERM TO CHECK THE NUMBER OF CREDIT HOURS FOR EACH STUDENT OUR THIRD HOURS

HOURS

HOURS

HOUSE AND THE CREDIT OF FUNDS TO A STUDENT WITHOUT ENROLLED HOURS

HOURS

HOURS

HOUSE AND THE CREDIT OF FUNDS TO A STUDENT WITHOUT ENROLLED HOURS

HOURS

HOURS

HOURS

HOUSE AND THE CREDIT OF FUNDS TO A STUDENT WITHOUT ENROLLED HOURS

HOURS

HOURS

HOURS

HOURS

HOURS

HOUSE AND THE CREDIT OF FUNDS TO A STUDENT WITHOUT ENROLLED HOURS

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DLN: 93493136066161

**Employer identification number** 

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

ın Part III

section 53 4958-6(c)?

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

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

**Compensation Information** 

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

THE	E UNIVERSITY OF THE SOUTH			62 0475607			
Da	rt I Questions Regarding Compensation	,		62-0475697			
- (4	Questions Regarding compensation	<u> </u>				Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III			•		103	140
	First-class or charter travel	্ব		Housing allowance or residence for personal use			
	Travel for companions	Ë		Payments for business use of personal residence			
	Tax idemnification and gross-up payments			Health or social club dues or initiation fees			
	Discretionary spending account	<b>▽</b>	•	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses desc	-			1b	Yes	
2	Did the organization require substantiation prior to r officers, directors, trustees, and the CEO/Executive				2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the	at app	ly	,			
	Compensation committee	<u> </u>		Written employment contract			
	Independent compensation consultant  Form 990 of other organizations	ন ঘ		Compensation survey or study Approval by the board or compensation committee			
	1 of the 990 of other organizations	14		Approval by the board of compensation committee			
4	During the year, did any person listed in Form 990, for a related organization	Part V I	ΙI	, Section A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	payme	nt	t?	4a		No
ь	Participate in, or receive payment from, a supplemen	ntal noi	no	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-ba	ased co	or	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide t	the	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	st com	ηp	lete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	lıne 1a	а,	did the organization pay or accrue any			
а	The organization?				5a		Νo
b	Any related organization?				5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	lıne 1a	а,	did the organization pay or accrue any			
а	The organization?				6a		Νo
b	Any related organization?				6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III						
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," d				7		No

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

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

8

Νo

Νo

### 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)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	ļ	(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	(F) Compensation
	·	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Dr Joel L Cunningham	(I) (II)	262,454 0	0	18,512 0	36,750 0	39,769 0	357,485 0	
John Gatta	(I)	152,150 0	0	20,396 0	17,215 0	672 0	190,433 0	
Eugene Prunty	(I) (II)	148,127 0	0	22,396 0	26,027 0	7,294 0	203,844	
Linda Lankewicz	(I) (II)	148,453 0	0	21,262 0	17,560 0	6,694 0	193,969 0	
Frederick Croom	(I) (II)	158,735 0	0	762 0	24,940 0	9,491 0	193,928 0	
Jerry Forster	(1) (11)	156,928 0	0	90	16,490 0	48,311 0	221,819	
Robert W Pearigen	(I)	154,228 0	0	258 0	24,734 0	24,563 0	203,783 0	
Donna Pierce	(I) (II)	140,023	0	5,658 0	15,063 0	32,494 0	193,238 0	
John Reishman	(I) (II)	130,520 0	0	12,411 0	1	6,639 0	171,187 0	
Yasmeen Mohiuddin	(ı) (ıı)	113,785 0	0	22,329 0	13,740	7,157 0	157,011 0	
Gerald Smith	(1) (11)	133,632 0	0	617 0	20,804	9,491 0	164,544 0	
Jett M Jay Fisher Jr	(1) (11)	101,748 0	0	3,288 0	10,079 0	92,388 0	207,503	
		+						

### Part III Supplemental Information

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

Ident if ier	Return Reference	Explanation
SCHEDULE J	Ia	THE UNIVERSITY REQUIRES THE VICE-CHANCELLOR TO OCCUPY THE ON-CAMPUS RESIDENCE PROVIDED FOR HIM CERTAIN SERVICES ARE PROVIDED WITH THE RESIDENCE SUCH AS A CUSTODIAN THE PORTION OF THE STRUCTURE ALLOCABLE TO PERSONAL LIVING QUARTERS AND THE RELATED SERVICES FOR SUCH QUARTERS ARE INCLUDED IN HIS NON-TAXABLE BENEFITS REPORTED ON SCHEDULE J PART II, COLUMN (D)

Schedule J (Form 990) 2009

DLN: 93493136066161

OMB No 1545-0047

Open to Public

Inspect ion

### **Schedule K** (Form 990)

**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.

Department of the Treasury Internal Revenue Service

Name of the organization THE UNIVERSITY OF THE SOUTH

**Bond Issues** 

**Employer identification number** 

62-0475697

	Dona 1550C5													
	(a) Issuer Name	(b) Issuer EIN	<b>(c)</b> CUSIP #	(d) Date I	Issued	( <b>e)</b> Issue	Price	( <b>f)</b> Des	scription of F	ourpose	( <b>g</b> ) De	feased		On alf of uer
											Yes	No	Yes	No
A	FRANKLIN CO HEALTH AND EDUCATION FACILITIES BOARD	52-1282324	353325851	12-01-2	2005	13,2	:00,000	BUILDING	RENOVATI	ONS		x		x
В	FRANKLIN CO HEALTH AND EDUCATION FACILITIES BOARD	52-1282324	_	07-01-2	2009	14,4		REDEMPTION BONDS/AC		) R		х		х
Pai	rt III Proceeds													
	T : 1			A			В		С	<u> </u>	D		E	
	Total proceeds of issue			1	3,200,00		14,400,0			<del> </del>		+		
	Gross proceeds in reserve funds					0		0		<del>                                     </del>				
3	Proceeds in refunding or defeasan	nce escrows				0		0		<u> </u>				
4	Other unspent proceeds					0		0				$\perp$		
5	Issuance costs from proceeds				87,16	7	46,8	87				$\bot$		
6	Working capital expenditures from	n proceeds				0		0						
7	Capital expenditures from proceed	ds		1	3,200,00	0	14,400,0	00		T		$\perp$		
8	Year of substantial completion			200	08	20	010							
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
9	Were the bonds issued as part of	a current refunding is	sue?		х	X								
10	Were the bonds issued as part of	an advance refunding	, issue?		Х		Х							
11	Has the final allocation of proceed	ds been made?		Х		X								
12	Does the organization maintain active the final allocation of proceeds?	dequate books and re	cords to support	Х		Х								
Par	t IIII Private Business Use	<u>,                                    </u>												
					A   N-	Yes	B N-	Yes	C No	Yes	_	Ye	E	
1	Was the organization a partner in which owned property financed by		ember of an LLC,	Yes	No X	Yes	No X		NO	res	No	1 Tes	5	No
2	Are there any lease arrangements which may result in private busine	•	inanced property		х		х							
For P	Privacy Act and Paperwork Reduction A	act Notice, see the Inst	ructions for Form 990			Cat No 5	0193E				Schedule	K (Form	990) 20	09

Schedule K (Form 990) 2009

Part III Private Business Use (Continued)

			A	ı	3		С		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?		х		х						
3b	Are there any research agreements with respect to the financed property which may result in private business use?		х		x						
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	х		х							
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		0 %		0 %						
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		0 %		0 %						
6	Total of lines 4 and 5		0 %		0 %						
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х		х							

Part IV Arbitrage

			١	E	3		С		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?	х		х							
2	Is the bond issue a variable rate issue?		Х	Х							
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		Х		Х						
b	Name of provider										
С	Term of hedge										,
4a	Were gross proceeds invested in a GIC?	Х			Х						
b	Name of provider	TRANSAME OCCIDEN	RICA								
С	Term of GIC		1 7								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	х									
5	Were any gross proceeds invested beyond an available temporary period?		х		х						
6	Did the bond issue qualify for an exception to rebate?		х		Х						
									Schodul	k (Form 99)	1) 2009

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DLN: 93493136066161

### Schedule L

(Form 990 or 990-EZ)

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

**Transactions with Interested Persons** 

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

	f the organization /ERSITY OF THE SOUTH								. ,	identifica	tion nun	nber	
Part I	Excess Benefit Tran	sacti	ons (s	ection 501(c)(	3) a	and section 501	1 (c)		52-0475 Izations				
	Complete if the organizati										ıne 40b		
1	(a) Name of disqu	ualified	person			<b>(b)</b> Des	crinti	on of trans	action		(c)	Cor	rected?
	. ,		•			(2) 2 0 0	0117				Y (	es	No
_													
	er the amount of tax impose								year und	er			
	tion 4958									* * —			
<b>3</b> Ent	er the amount of tax, if any,	, on line	2, abo	ve, reimbursed b	y th	e organization .	•			<b>-</b> \$			
Part I	Loans to and/or F	rom 1	Intere	sted Persons	s.								
	Complete if the organiz	ation a	nswered	d "Yes" on Form	990	, Part IV , line 26	6, or I	Form 990-	EZ, Part	V, line 38	а		
		(b) L	oan to				, .	N T	(f)		()		
<b>(a)</b> Nam	ne of interested person and		m the	(c)O riginal		(d)Balance due		e <b>)</b> In ault?	A ppro		(g)Wr		
	purpose	organi	zation?	principal amou	ınt	(a)Barance ade			commit				
		То	From				Yes	No	Yes	No	Yes		No
	<u> </u>				•	97,933							
Part II	Grants or Assistan Complete if the orga						V lue	no 27					
				<b>b)</b> Relationship be									
(	(a) Name of interested perso	on	'.	-		ganization	213011	1 A( <b>2)</b>	mount of	grant or ty	pe of as	sıst	ance
RECIPIE	NTS											į	57,067
RECIPIE	NTS											4	49,950
Do ut Ti	V Ducinosa Tuenes et	: T	' I	in a Tubana ak		Da							
Part I	Business Transact Complete if the orga						V lır	ne 28a - 28	Rh or 2	8c			
	complete if the orga	mzacio		Relationship	T	1111 330, 1 die 1	<b>v</b> ,	10 200, 20	36, 01 2	<del> </del>	(e	) Sha	arıng of
/-	) Name of interested persor	5		veen interested		(c) A mount of		(d) Doco	rintion	ftransact	lord		ation's
(a	) Name of interested persor	1		rson and the		transaction		(u) Desc	.iiptioii o	i tialisact	<u>⊢'</u>		nues?
MTG::: =	L THOMBCON HOUSE		<del> </del>	organization	+		165	TNIVE 07::	ENT ME	47 5555		es	No
CALDW	L THOMPSON VP-MONTA	G	TRUST	EE		130,	462	INVESTM SEE SCH		VII FEES-			Νο
22011					+				-				
					+								

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DLN: 93493136066161

OMB No 1545-0047

Inspection

### **SCHEDULE M** (Form 990)

Department of the Treasury

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

**NonCash Contributions** 

Internal Revenue Service Name of the organization THE UNIVERSITY OF THE SOUTH

**Employer identification number** 

62-0475697

Part	I Types of Property			-				
		(a) Check If applicable	<b>(b)</b> Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	<b>(d</b> Method of d reven	etermı	nıng	
<b>1</b> A	rt—Works of art	Х	4	_	N/A			
	rt—Historical treasures .				11771			
	rt—Fractional interests							
	ooks and publications	х		0	N/A			
	lothing and household							
	oods	Х		0	N/A			
<b>6</b> C	ars and other vehicles							
<b>7</b> Bo	oats and planes							
<b>8</b> In	ntellectual property							
<b>9</b> Se	ecurities—Publicly traded .	Х	86	3,279,136	QUOTED STOCK P	RICES	5	
<b>10</b> Se	ecurities—Closely held stock .							
О	ecurities—Partnership, LLC, r trust interests							
	ecurities—Miscellaneous							
c	ualified conservation ontribution—Historic tructures							
<b>14</b> Q	ualified conservation							
С	ontribution—Other							
	ealestate—Residential .	Х	1	746,919	APPRAISED VALU	<u> </u>		
<b>16</b> Re	ealestate—Commercial							
	ealestate—Other							
	ollectibles	X	2	0	N/A			
	ood inventory							
	rugs and medical supplies .							
	axıdermy							
	istorical artifacts							
	cientific specimens							
	rcheological artifacts			_				
<b>25</b> 0	ther ► ( HORSES )	X	5	0	N/A			
<b>36</b> 0	EQUESTRIAN ther►(EQUIPMENT_)	×	1	13 500	APPRAISED VALU	F		
20 0	BUILDING			13,300	ATTRAISED VALO			
<b>27</b> 0	ther ► (MATERIALS_)	X	1	0	N/A			
<b>28</b> 0	ther • (OTHER)	Х	1	0	N/A			
<b>29</b> N	Jumber of Forms 8283 received	by the org	anızatıon durıng the tax yea	ar for contributions				
fo	or which the organization compl	eted Form 8	3283, Part IV, Donee Ackn	owledgement	29			5
							Yes	No
<b>30a</b> D	Ouring the year, did the organiza	tion receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it			
n	nust hold for at least three year	s from the o	date of the initial contribution	on, and which is not require	d to be used			
fo	or exempt purposes for the enti	re holding p	eriod?			30a		No
<b>b</b> I	f "Yes," describe the arrangeme	ent in Part I	I					
<b>31</b> D	oes the organization have a gif	t acceptano	ce policy that requires the r	eview of any non-standard	contributions?	31	Yes	
	oes the organization hire or use ontributions?	e third parti	es or related organizations	to solicit, process, or sell i	non-cash	32a		No
<b>b</b> I	f "Yes," describe in Part II							
<b>33</b> I	f the erappization did not report	rovonuos i	n column (c) for a type of n	roperty for which column (a	\ is chacked			

#### Part II

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Ident if ier	Return Reference	<b>Explanat ion</b>
SCHEDULE M		REVENUES ARE NOT RECOGNIZED FOR NON-CASH CONTRIBUTIONS (GIFTS-IN-KIND) WHEN THE RELATED ASSET IS NOT RECOGNIZED ON THE BALANCE SHEET

Schedule M (Form 990) 2009

Software ID: Software Version:

**EIN:** 62-0475697

Name: THE UNIVERSITY OF THE SOUTH

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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.

2009

DLN: 93493136066161

Open to Public Inspection

Name of the organization THE UNIVERSITY OF THE SOUTH

Employer identification number

THE ONIVERSIT	Y OF THE SOUTE	62-0475697
ldentifier	Return Reference	Explanation
990 PART	LINE 4D	OTHER PROGRAM SERVICES Research - While outstanding teaching is the primary focus of the faculty's work with both undergraduate and graduate students, the complementary nature of research that informs instruction and creates new knowledge is integral to the faculty's scholarly life at the University. The publication of books and of articles in refereed journals, along with presentations to professional conferences in the academic disciplines, are a significant part of tenure and promotion considerations, and each year an impressive array of scholarly work is produced by the faculty, supported by a program of sababitical leave for junior and senior faculty like in 2009-10, members of the faculty were awarded nearly \$626,000 in national and international grants supporting research in the visual arts, history, and chemistry. Perhaps more significantly, faculty across the disciplines involve students in their research while also creating opportunities for students to conduct original research of their own during the academic year or the summer. Much of the work is coordinated through an Office of Undergraduate Research which promotes close faculty-student interaction in research, and also coordinates access to these opportunities. Operation and Mantenance of Plant - The university won sand maintains 106 buildings with a total of approximately 1,331,000 square feet for academic instruction, student services, and residence halls. Thirty-four of these are residence halls, including several foreign language houses, a community engagement house and a Green House, where students live in an intentional community focused on sustainable living. An additional 136 university structures (with another 337,306 square feet) are used as rental housing, primarily for members of faculty and staff. The oldest university building dates to 1866, the new est was completed in 2010. Approximately 80 percent of campus buildings (including residence halls and academic buildings) have wireless internet access. All buildings have wired connec

Identifier	Return Reference	Explanation
990 PART V	LINE 4B - FOREIGN COUNTRIES	The follow ing information is provided for clarification regarding accounts in foreign countries. Spain (Academic Program)

anniversary of the university, which sits at the center of campus

ldentifier	Return Reference	Explanation
990 PART VI	SECTION A LINE 10	THE AUDIT COMMITTEE OF THE BOARD OF REGENTS REVIEWS THE 990 IN DETAIL THE COMMITTEE THEN PROVIDES THE BOARD OF REGENTS COPIES FOR CONSIDERATION BEFORE FILING

ldentifier	Return Reference	Explanation
990 PART VI	SECTION B LINE 12C	IN ACCORDANCE WITH THE UNIVERSITY'S CONFLICT OF INTEREST POLICY, THE POLICY AND CONFLICT DISCLOSURE FORMS SHALL BE CIRCULATED ANNUALLY BY MEMBERS OF THE EXECUTIVE OFFICE'S STAFF TO TRUSTEES, REGENTS, OFFICERS, AND OTHERS DESIGNATED BY THE VICE CHANCELLOR THE COMPLETED DISCLOSURE FORMS SHALL BE REVIEWED BY LEGAL COUNSEL OR HER/HIS DESIGNEE FOR THE PURPOSES OF MONITORING COMPLIANCE WITH THE POLICY AND DETERMINING WHAT ACTION, IF ANY, IS NEEDED REGARDING DISCLOSED CONFLICTS

Identifier	Return Reference	Explanation
990 PART VI	SECTION B LINE 15	THE EXECUTIVE COMMITTEE OF THE BOARD OF REGENTS REVIEWS POLICIES AND PRACTICES FOR EXECUTIVE COMPENSATION TO ENSURE THEY ARE GENERALLY CONSISTENT WITH SURVEY DATA FROM COMPARABLE INSTITUTIONS FOR COMPARABLE POSITIONS

ldentifier	Return Reference	Explanation
990 PART VI	SECTION C LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST GOVERNING DOCUMENTS ARE ALSO AVAILABLE AT HTTP //ABOUT SEWANEE EDU/TRUSTEES/DOCUMENTS

Identifier	Return Reference	Explanation
SCHEDULE L	PART IV COLUMN (D)	INVESTMENT MANAGEMENT FEES WERE PAID TO MONTAG & CALDWELL BY THE ORGANIZATION MR THOMPSON IS AN OFFICER AT MONTAG & CALDWELL BUT IS NOT DIRECTLY INVOLVED WITH THE UNIVERSITY'S INVESTMENTS