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Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

Open to Public

A Fa	- + -	2000	landar		7 01 2000 and anding 06 20	2010				Inspection	
		applicable		r, or tax year beginning C Name of organization	07-01-2009 and ending 06-30	J-2010		D Employer	identifi	ication number	
_	dress cl		Please use IRS	THE UNIVERSITY OF PUGE	F SOUND			91-0564	961		
	me cha	-	label or print or	Doing Business As				E Telephone		er	
	ial retu	_	type. See Specific			u de		(253) 87	9-611	0	
_	mınate		Instruc- tions.	Number and street (or P C 1500 N Warner St CMB 10	box if mail is not delivered to street	address) R	Room/suite	G Gross recei	ots \$ 20	5,287,179	
	ended		tions.	City or town state or cour	tny and ZID + 4			-			
				City or town, state or cour Tacoma, WA 984161075	try, and ZIP + 4						
App	DIICATIOI	n pending									
				ne and address of princip R Thomas	oal officer	H		is a group ret ates?	urn for	□Yes 🔽 No	
			same a	s C above			allille	ales		i tes it no	
			Tacoma	a,WA 98416		H	(b) Area	ll affiliates incl	uded?	┌ Yes ┌ No	
T Ta	x-exen	npt status	▼ 501(c)) (3) ◀ (insert no)	17(a)(1) or		_			e instructions)	
			v pugetsou		.,(4)(2) 0. , 02.	─ │ "	(c) Gro	up exemption	numbe	:	
					* a.v E	<u> </u>			T		
K For	n of or	ganization	 ✓ Corporat	tion Trust Association	Other ►		L Year of fo	ormation 1888	M Sta WA	te of legal domicile	
Pa	rt I	•	•								
	1	Briefly o		e organization's mission	or most significant activities						
8		Ludeati	011								
Governance											
Ē.	_			-				250/ 61			
5	2		,		ontinued its operations or disp						
	3		_	_	body (Part VI, line 1a)					3	
Activities &	4			_	the governing body (Part VI, lii	ne 1b) .		•		3	
Ē	5			nployees (Part V, line 2a					5	2,89	
ទ្ធ	6			olunteers (estimate if neo	• •				6	59	
•	1				m Part VIII, column (C), line 1	12				-477,38	
	ь	Net unr	elated busi	iness taxable income fro	m Form 990-T, line 34				7b	-487,58	
							Pric	or Year		Current Year	
a.	8	Contri	butions and	d grants (Part VIII, line	1h)			13,310,062	1	15,154,187	
Ä	9	Progra	m service	revenue (Part VIII, line	114,136,822			121,391,487			
Revenue	10), lines 3, 4, and 7d)	_		6,781,935		3,715,469	
_	11		•	, , , , , , , , , , , , , , , , , , , ,	es 5, 6d, 8c, 9c, 10c, and 11e)	` ⊢		-7,806,103		-361,605	
	12				ust equal Part VIII, column (A), line		126,422,716	,	139,899,538	
	13				column (A), lines 1-3)	_		31,507,871	+	36,260,064	
	14				column (A), line 4)			02,007,072		0	
	15				enefits (Part IX, column (A), li	_					
8	13	10)	.5, 011101 00	ompensation, employee i	rememes (rare 1x, coramin (x,), n			61,685,834		62,081,086	
Expenses	16a	Profes	sıonal fund	raising fees (Part IX, co	umn (A), line 11e)			0		0	
ਡੋ	ь	Total fu	ndraising exp	enses (Part IX, column (D), lı	ne 25) 1- 2,898,754						
	17	Other	expenses ((Part IX, column (A), line	s 11a-11d, 11f-24f)			40,300,492		40,558,589	
	18		•	•	qual Part IX, column (A), line 2	· · ·		133,494,197	1	138,899,739	
	19	Reven	ue less exp	penses Subtract line 18	from line 12			-7,071,481		999,799	
Net Assets or Fund Balances								g of Current Year		End of Year	
set afat	20	Totals	ssets (Par	rt X, line 16)				446,759,237	+	474,197,981	
d B	21			Part X, line 26)		. H		111,588,852	+	111,727,179	
25 25 25 25 25 25 25 25 25 25 25 25 25 2	22				21 from line 20	· .		335,170,385	_	362,470,802	
Pai	1111		ature Blo							,	
		Under p	enalties of pe	erjury, I declare that I have ex	amined this return, including accompa						
		and belo	ef, it is true, o	correct, and complete Declara	ition of preparer (other than officer) is	s based on	all informat	tion of which pre	parer ha	is any knowledge	
Sign	1						2011	-05-11			
Here		Signa	ature of office	er			Date				
		Sher	ry B Mondou	VP for Finance & Administration	on .						
			or print nam								
		Preparer'	's L		Date	Check	c ıf	Preparer's ide		number	
Paid		signature				self- empo	lyed 🕨 🦵	(see instruction			
	arer's	Firm's na	me (or yours	s k		Lempo	.,				
Use (ıf self-en	nployed),)				EIN 🕨	EIN ▶		
	•	address,	and ZIP + 4					Phone no			
		1								–	
Mayi	the IR	≀S discus	s this retu	rn with the preparer show	vn above? (see instructions) .					Yes No	

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

Education

		• •	· · ·		Form 000 (2000)
4e	Total program service e		126,166,701		•
-	(Expenses \$	•	ncluding grants of \$	O) (Revenue \$	0)
4d	Other program services	(Describe in S	chedule O)		
40	(couc	, (Expenses \$	including grants o) (icvenue \$,
4c	(Code) (Expenses \$	ıncludıng grants o	f \$) (Revenue \$)
4b	(Code) (Expenses \$	ıncludıng grants o	f \$) (Revenue \$)
	actively seeks and supports	aiversity in its stude	nts, faculty, and staff, and fosters lifelo	ng relationships with its alumni	
	designed to support the acad	demic experience, in	cluding athletics, study abroad, commu	nity service, and leadership opportunities	Globally focused, Puget Sound
				o of 11 1 and places an emphasis on exce orous residential college, Puget Sound prov	
	choose from 1,200 classes in	n more than 50 majo	or areas of study in the arts, sciences, h	, Puget Sound serves 2,600 students from umanities, and social sciences, including gr	aduate programs in education,
4a	(Code) (Expenses \$, ,		, , ,
	/Codo	\ /Evnoposo #	126,166,701 including grants of	of \$ 36,260,064) (Revenue \$	120,914,101)
	allocations to others, the	e total expenses	, and revenue, if any, for each pro	ogram service reported	
	Section 501(c)(3) and 5	01(c)(4) organiz	ations and section 4947(a)(1) t	rusts are required to report the am	
4	Describe the exempt nur	pose achieveme	nts for each of the organization's	s three largest program services by	expenses
	If "Yes," describe these	changes on Sche	edule O		
-			· · · · · · · · · · ·		┌ Yes ┌ No
3			r make significant changes in ho	wit conducts, any program	
	If "Yes," describe these			· ·	,,
2					☐ Yes 🔽 No
2	Did the organization and	ertake anv signif	ficant program services during th	ne vear which were not listed on	

art TV	Chackli	st of De	auired 9	Schedules
	CHECKII	SL UI RE	uuneus	ociieuuies

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		No
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			
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	Yes	
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 ? <i>If "Yes," complete Schedule F, Part III</i>	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	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

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		Νο
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	
b	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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
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		N o
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	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			
		28a		Νο
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	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		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	Yes	
36	Section 501(c)(3) organizations. 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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

rt V	Statements	Regarding	Other	TRS F	ilinas	and '	Tax	Comi	oliance
	ota to illoiles	itegai aiiig	•					~~	J.:

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable			
	1a 3,854			
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
Ь	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N o
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N o
С	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		
5a	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		N o
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	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		N o
	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		No
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		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		 N о
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess	7h		
	business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 a	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
-	facilities			
11	Section 501(c)(12) organizations. Enter			
	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)			
	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			

Janet S Hallman

(253) 879-8620

Associate VP/Controller 1500 N Warner St CMB 1075 Tacoma, WA 984161075

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

	processes, or changes in Schedule O. See instructions.			
Se	ction A. Governing Body and Management		_	
			Yes	No
1a	Enter the number of voting members of the governing body 1a 33			
ь	Enter the number of voting members of the governing body			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any			
_	other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		
_	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ction B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)	1		T
			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 activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11				
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	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)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ► MA , MD , ME , MI , NH , OR , WA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply			
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ie orga	ınızatıor	n 🕨

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

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

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

Check this box if the organization did not compensate any current or former officer, dir									or key employee	
(A) Name and Title	(B) Average hours	Posi t	(C) Position (check all that apply)					(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

		, age
12	n l	/191 20

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 47

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo
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			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Sierra Construction Co 1990 144th Ave NE Woodinville, WA 98072	Const supplies & services	4,812,012
Bohlin Cywinski Jackson 1932 1st Ave Ste 916 Seattle, WA 98101	Architectural services	1,499,307
Colorgraphics PO Box 31001-1283 Pasadena, CA 91110	Printing supplies & serv	347,377
DLR Group Inc 901 5th Ave Ste 700 Seattle, WA 98164	Project design services	342,321
Long Painting Company 21414 68th Ave S Kent, WA 98032	Painting supplies & serv	316,210
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ▶66	who received more than	

Form 99								Page 9
Part V	1111	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated cam	paigns 1a					
gra Nou	b		es 1b	0				
fts,	c		ents 1 c	10,680				
<u> </u>	d e	Government grants	eations 1d s (contributions) 1e	2,070,445				
ons sin	f	_	ons, gifts, grants, and 1f	13,073,062	-			-
Contributions, gifts, grants and other similar amounts	g	sımılar amounts no	ot included above butions included in					
9 E	h	Total. Add lines	s 1a-1f	▶	15,154,187			
9				Business Code				
Program Serwce Revenue	2a	Education		611,310	121,391,487	121,391,487	0	0
Fe	b							
AC e	С							
Se	d							
Ē	e							
100,	f	All other progra	am service revenue		0	0	0	0
	g	Total. Add lines	s 2a-2f		121,391,487			
	3		ome (including dividend	. +	2,480,767	0	0	2,480,767
	4		ar amounts) stment of tax-exempt bond	· · ·	2,480,707	0	0	2,480,767
	5			· · · · · · · · · · · · · · · · · · ·	0	0	0	0
		·	(ı) Real	(II) Personal				
	6a	Gross Rents	0	0				
	b	Less rental expenses	0	0				
	c	Rental income or (loss)	0	0				
	d	Net rental inco	me or (loss)		0	0	0	0
	7a	Gross amount from sales of assets other	(1) Securities 66,548,135	(II) O ther 59,644				
	b	than inventory Less cost or other basis and sales expenses	65,313,284	59,793				
	c d	Gain or (loss)	1,234,851	-149	1,234,702	0	0	1,234,702
-	8a	Gross income f	rom fundraising		1,231,702	Ŭ	-	1,231,702
Other Revenue		events (not inc \$9	luding ,088 reported on line 1c)	6,009				
her	b	Less directex	penses b	10,817				
ŏ	с		loss) from fundraising		-4,808	0	0	-4,808
	9a	Gross income f See Part IV, lin	rom gaming activities le 19 a	2,072				
	b	Less direct ex	penses b	3,747				
	С		loss) from gaming activ	vities	-1,675	0	0	-1,675
	10a	Gross sales of returns and allo		0				
	b		oods sold b	0				
]	С		(loss) from sales of inve		0	0	0	0
}	11-	Miscellaneous		Business Code 900,099	-477,386	0	-477,386	0
	11a	Loss other end		611,310	-4/7,386 278,190	0	-4/7,386	278,190
	ь	Gain on insurar		611,310	-155,926	0	0	-155,926
	c d	All other reven	-	311,310	0	0	0	153,520
	e	Total. Add lines	ı	·		Ŭ		
			- ·	▶	-355,122			

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

Α	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to	•		D).	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				<u> </u>
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	35,875,439	35,875,439		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	384,625	384,625		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,054,083	543,899	1,156,289	353,895
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	79,722	55,110	24,612	
7	Other salaries and wages	45,717,348	37,944,928	6,392,811	1,379,609
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	4,818,189	3,998,807	702,815	116,567
9	Other employee benefits	6,175,938	4,874,475	1,101,575	199,888
10	Payroll taxes	3,235,806	2,519,464	599,186	117,156
11	Fees for services (non-employees)				
а	Management				
b	Legal	71,602		71,602	
c	Accounting	130,947		130,947	
d	Lobbying	3,416		3,416	
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	2,135,780		2,135,780	
g	Other	3,712,005	2,701,281	965,988	44,736
12	Advertising and promotion	1,868,681	1,301,470	394,572	172,639
13	Office expenses	3,253,535	2,637,941	480,451	135,143
14	Information technology	1,284,233	1,086,249	163,855	34,129
15	Royalties	23,267	21,073	2,194	
16	Occupancy	4,192,853	1,699,569	2,492,440	844
17	Travel	1,893,042	1,634,324	161,855	96,863
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	266,578	218,157	40,949	7,472
20	Interest	2,744,973	2,633,891	74,476	36,606
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	10,327,671	8,918,072	1,294,774	114,825
23	Insurance	671,416	15,692	655,724	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	Allocation of plant O & M	0	9,475,127	-9,561,285	86,158
b	Goods purchased for resale	4,809,584	4,809,584	0	0
c	Study abroad program expense	2,687,029	2,687,029	0	0
d	Membership dues	260,239	105,094	153,025	2,120
е					
f	All other expenses	221,738	25,401	196,233	104
25	Total functional expenses. Add lines 1 through 24f	138,899,739	126,166,701	9,834,284	2,898,754
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	0	0	0	0
	campaign and fundraising solicitation	1 0	l 0	l ol	0

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			5,422,498	1	12,081,526
	2	Savings and temporary cash investments			37,658,178	2	39,409,033
	3	Pledges and grants receivable, net			17,755,662	3	14,744,525
	4	Accounts receivable, net			4,931,304	4	1,358,488
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II		n 4958(f)(1)) and			
		Schedule L				6	
ssets	7	Notes and loans receivable, net		16,417,193	7	16,506,334	
8	8	Inventories for sale or use		684,977	8	757,097	
⋖	9	Prepaid expenses and deferred charges			3,019,374	9	3,551,369
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	224,018,474			
	ь	Less accumulated depreciation	10b	70,747,242	153,014,408	10c	153,271,232
	11	Investments—publicly traded securities			110,958,946	11	124,146,337
	12	Investments—other securities See Part IV, line 11		90,371,921	12	98,682,087	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets	384,528	14	595,428		
	15	Other assets See Part IV, line 11			6,140,248	15	9,094,525
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			446,759,237	16	474,197,981
	17	Accounts payable and accrued expenses .			13,321,357	17	16,318,964
	18	Grants payable				18	21,442
	19	Deferred revenue			1,946,644	19	2,542,742
	20	Tax-exempt bond liabilities			65,154,144	20	63,694,205
<u>ē</u>	21	Escrow or custodial account liability Complete Part IV of Schedu	le D		61,523	21	131,189
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	′				
ä		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties	s .			23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$			31,105,184	25	29,018,637
	26	Total liabilities. Add lines 17 through 25			111,588,852	26	111,727,179
S)		Organizations that follow SFAS 117, check here ► $\sqrt{}$ and comp	plete	lines 27			
ĕ	27	through 29, and lines 33 and 34. Unrestricted net assets			182,896,983	27	192,467,604
<u>. ಅ</u>	27 28	Temporarily restricted net assets			58,318,462		71,241,008
Fund Balance	29	Permanently restricted net assets			93,954,940		98,762,190
ŭ	23	Organizations that do not follow SFAS 117, check here ▶ □ a	nd co-	mnlet e	33,337,340	23	55,752,190
Ī		lines 30 through 34.	iu cor	iibiere			
s 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	
ΔS	32	Retained earnings, endowment, accumulated income, or other fi				32	
Net /	33	Total net assets or fund balances			335,170,385		362,470,802
Z	34	Total liabilities and net assets/fund balances			446,759,237	34	474,197,981
. ——	L	<u> </u>			ı		<u> </u>

Part XI Financial Statements and Reporting

			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		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
C	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both Separate basis Consolidated basis Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Form **990** (2009)

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Inspection

		e organization GTY OF PUGET SOUND	Employer ide	entification n	umber					
TITE C	MIVERS	ATT OF TOOLE SOOND	91-056496	1						
Pa	rt I	Reason for Public Charity Status (All organizations must comp								
		zation is not a private foundation because it is (For lines 1 through 11, check								
1	Γ	A church, convention of churches, or association of churches section 170(b)	(1)(A)(i).							
2	굣	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)								
3	Γ	A hospital or a cooperative hospital service organization described in section	170(b)(1)(A)(iii).							
4	Γ	A medical research organization operated in conjunction with a hospital desc hospital's name, city, and state	ribed in section 170(b)(1)	(A)(iii). Ente	r the					
5	Γ	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)								
6	Γ	A federal, state, or local government or governmental unit described in section	on 170(b)(1)(A)(v).							
7	Γ	An organization that normally receives a substantial part of its support from a described in section 170(b)(1)(A)(vi) (Complete Part II)	a governmental unit or fror	n the general	public	:				
8	Γ	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)							
9	Γ	An organization that normally receives (1) more than 331/3% of its support	from contributions, membe	ership fees, ai	nd gro	SS				
		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 inc	ome (less section 511 ta	x) from busin	esses					
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Co	mplete Part III)							
10	Γ	An organization organized and operated exclusively to test for public safety	See section 509(a)(4).							
11	Γ	An organization organized and operated exclusively for the benefit of, to perform one or more publicly supported organizations described in section 509(a)(1) the box that describes the type of supporting organization and complete lines a Type I b Type II c Type III - Functionall	or section 509(a)(2) See 11e through 11h	•	a)(3).	Check				
e	Γ	By checking this box, I certify that the organization is not controlled directly other than foundation managers and other than one or more publicly supporte section 509(a)(2)								
f g		If the organization received a written determination from the IRS that it is a T check this box Since August 17, 2006, has the organization accepted any gift or contribution		supporting o	rganız	ration,				
		following persons?								
		(i) a person who directly or indirectly controls, either alone or together with p	ersons described in (ii)	44.00	Yes	No				
		and (III) below, the governing body of the the supported organization?		11g(i)		 				
		(ii) a family member of a person described in (i) above?		11g(ii)						
		(iii) a 35% controlled entity of a person described in (i) or (ii) above?		11g(iii)		<u> </u>				
_h 		Provide the following information about the supported organization(s)								

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	e vour governing		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) A mount of support?
		ınstructions))	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.	÷·/		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(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) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(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 stop here						-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
_	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. 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						▶ ┌
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) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
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) 2006	(c) 2007	(d) 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 stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	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	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 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 stop here. 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

DLN: 93493131025341

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

Political Campaign and Lobbying Activities

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

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

Na	ction 501(c)(4), (5), or (6) organ			Employ	er ident	tification number	
THE	UNIVERSITY OF PUGET SOUND			91-056	91-0564961		
ar	t I-A Complete if the or	ganization is exempt und	ler section 501(organization.	
1	Provide a description of the oi	ganızatıon's dırect and ındırect p	olitical campaign ac	tivities in Part IV			
2	Political expenditures				-	\$	
3	Volunteer hours						
Par	t I-B Complete if the or	ganization is exempt und	ler section 501	(c)(3).			
1	•	e tax incurred by the organization			-	\$	
2	Enter the amount of any excis	e tax incurred by organization ma	anagers under sectio	n 4955	.	\$	
3	If the organization incurred a	section 4955 tax, did it file Form	4720 for this year?			☐ Yes ☐ No	
4a	Was a correction made?					┌ Yes ┌ No	
b	If "Yes," describe in Part IV						
Par	t I-C Complete if the or	ganization is exempt und	ler section 501(c) except sectio	n 501	(c)(3).	
1	Enter the amount directly exp	ended by the filing organization fo	or section 527 exem	pt function activities	•	\$	
2		organization's funds contributed t	to other organization	s for section 527	.	\$	
	exempt funtion activities				-	· -	
3	·	itures Add lines 1 and 2 Enter h	ere and on Form 112	20-POL, line 17b	•	\$	
4	Total exempt function expend Did the filing organization file	Form 1120-POL for this year?			•	\$	
	Total exempt function expend Did the filing organization file State the names, addresses a were made For each organization		er (EIN) of all section from the filing orgar d to a separate polit	n 527 political organi iization's funds Also ical organization, suc	enter th	to which payments ne amount of political	
4	Total exempt function expend Did the filing organization file State the names, addresses a were made For each organization	Form 1120-POL for this year? nd employer identification numbe tion listed, enter the amount paid tre promptly and directly delivere	er (EIN) of all section from the filing orgar d to a separate polit	n 527 political organi iization's funds Also ical organization, suc	enter the has a second from on's	to which payments ne amount of political	
4	Total exempt function expend Did the filing organization file State the names, addresses a were made For each organization contributions received that we fund or a political action comm	Form 1120-POL for this year? Ind employer identification numbe tion listed, enter the amount paid are promptly and directly delivere in the (PAC) If additional space	er (EIN) of all section from the filing organ d to a separate polit is needed, provide in	n 527 political organization's funds Also ical organization, suciformation in Part IV (d) A mount paid filing organization	enter the has a second from on's	to which payments ne amount of political separate segregated (e) A mount of political contributions receive and promptly and directly delivered to a separate political organization. If none	
4	Total exempt function expend Did the filing organization file State the names, addresses a were made For each organization contributions received that we fund or a political action comm	Form 1120-POL for this year? Ind employer identification numbe tion listed, enter the amount paid are promptly and directly delivere in the (PAC) If additional space	er (EIN) of all section from the filing organ d to a separate polit is needed, provide in	n 527 political organization's funds Also ical organization, suciformation in Part IV (d) A mount paid filing organization	enter the has a second from on's	to which payments ne amount of political separate segregated (e) A mount of political contributions receive and promptly and directly delivered to a separate political organization. If none	
4	Total exempt function expend Did the filing organization file State the names, addresses a were made For each organization contributions received that we fund or a political action comm	Form 1120-POL for this year? Ind employer identification numbe tion listed, enter the amount paid are promptly and directly delivere in the (PAC) If additional space	er (EIN) of all section from the filing organ d to a separate polit is needed, provide in	n 527 political organization's funds Also ical organization, suciformation in Part IV (d) A mount paid filing organization	enter the has a second from on's	to which payments ne amount of political separate segregated (e) A mount of political contributions receive and promptly and directly delivered to a separate political organization. If none	
4	Total exempt function expend Did the filing organization file State the names, addresses a were made For each organization contributions received that we fund or a political action comm	Form 1120-POL for this year? Ind employer identification numbe tion listed, enter the amount paid are promptly and directly delivere in the (PAC) If additional space	er (EIN) of all section from the filing organ d to a separate polit is needed, provide in	n 527 political organization's funds Also ical organization, suciformation in Part IV (d) A mount paid filing organization	enter the has a second from on's	to which payments ne amount of political separate segregated (e) A mount of political contributions receive and promptly and directly delivered to a separate political organization. If none	
4	Total exempt function expend Did the filing organization file State the names, addresses a were made For each organization contributions received that we fund or a political action comm	Form 1120-POL for this year? Ind employer identification numbe tion listed, enter the amount paid are promptly and directly delivere in the (PAC) If additional space	er (EIN) of all section from the filing organ d to a separate polit is needed, provide in	n 527 political organization's funds Also ical organization, suciformation in Part IV (d) A mount paid filing organization	enter the has a second from on's	to which payments ne amount of political separate segregated (e) A mount of political contributions receive and promptly and directly delivered to a separate political organization. If none	
4	Total exempt function expend Did the filing organization file State the names, addresses a were made For each organization contributions received that we fund or a political action comm	Form 1120-POL for this year? Ind employer identification numbe tion listed, enter the amount paid are promptly and directly delivere in the (PAC) If additional space	er (EIN) of all section from the filing organ d to a separate polit is needed, provide in	n 527 political organization's funds Also ical organization, suciformation in Part IV (d) A mount paid filing organization	enter the has a second from on's	to which payments ne amount of political separate segregated (e) A mount of political contributions receive and promptly and directly delivered to a separate political organization. If none	
4	Total exempt function expend Did the filing organization file State the names, addresses a were made For each organization contributions received that we fund or a political action comm	Form 1120-POL for this year? Ind employer identification numbe tion listed, enter the amount paid are promptly and directly delivere in the (PAC) If additional space	er (EIN) of all section from the filing organ d to a separate polit is needed, provide in	n 527 political organization's funds Also ical organization, suciformation in Part IV (d) A mount paid filing organization	enter the has a second from on's	to which payments ne amount of political separate segregated (e) A mount of political contributions receive and promptly and directly delivered to a separate political organization. If none	
4	Total exempt function expend Did the filing organization file State the names, addresses a were made For each organization contributions received that we fund or a political action comm	Form 1120-POL for this year? Ind employer identification numbe tion listed, enter the amount paid are promptly and directly delivere in the (PAC) If additional space	er (EIN) of all section from the filing organ d to a separate polit is needed, provide in	n 527 political organization's funds Also ical organization, suciformation in Part IV (d) A mount paid filing organization	enter the has a second from on's	to which payments ne amount of political separate segregated (e) A mount of political contributions receive and promptly and directly delivered to a separate political organization. If none	
4	Total exempt function expend Did the filing organization file State the names, addresses a were made For each organization contributions received that we fund or a political action comm	Form 1120-POL for this year? Ind employer identification numbe tion listed, enter the amount paid are promptly and directly delivere in the (PAC) If additional space	er (EIN) of all section from the filing organ d to a separate polit is needed, provide in	n 527 political organization's funds Also ical organization, suciformation in Part IV (d) A mount paid filing organization	enter the has a second from on's	to which payments ne amount of political separate segregated (e) A mount of political contributions receive and promptly and directly delivered to a separate political organization. If none	

section 4911 tax for this year?

┌ Yes ┌ No

P	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) and file	d Form 5768 ((election
	Check If the filing organization belongs to a	•			
<u> </u>	Check If the filing organization checked box	x A and "limited control" provisions apply			
	Limits on Lobbying E (The term "expenditures" means ar			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)		0	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)		3,416	
c	Total lobbying expenditures (add lines 1a and 1b	o)		3,416	
d	Other exempt purpose expenditures		138,896,323		
e	Total exempt purpose expenditures (add lines 1	c and 1d)		138,899,739	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both		1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:			
	Not over \$500,000	20% of the amount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000			
	Over \$17,000,000	\$1,000,000			
g	Grassroots nontaxable amount (enter 25% of lin	e 1 f)		250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er - O -		0	
	Subtract line 1 f from line 1 c If zero or less ente	r_0_		n	

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

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expendi	tures During •	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b 	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c	Total lobbying expenditures	228	235	242	3,416	4,121
_d	Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000
e 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f	Grassroots lobbying expenditures	0	0	0	0	0

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

		(a	1)	(b)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities? If "Yes," describe in Part IV				
j	Total lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
ь	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		ľ		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	+ HI=A. Complete if the organization is exempt under section $501(c)(4)$ section	501/6	1/51 0	r section	

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

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

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

	Dues, assessments and similar amounts from members	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	
	expenses for which the section 527(f) tax was paid).	
а	Current year	2a
b	Carryover from last year	2b

	i otal	20
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4

5 Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

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

Ident if ier	Return Reference	Explanation
SchC_P2A_S00_L01c		In addition to the lobbying amounts reported on line 1c, the university paid \$78,193 in membership dues to organizations that may have preformed lobbying activities on behalf of its membership. These organizations are 501(c)(3) organizations which are exempt under section 6033(e) from having to report to its membership the portion of dues that are allocable to political or lobbying activities. As such, the university does not have this information to report on this return.

5

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DLN: 93493131025341

OMB No 1545-0047

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.

Open to Public

ternal	Revenue Service ► Attach to Form 990. ► See separate instructions.		ПU	spection	on
	me of the organization E UNIVERSITY OF PUGET SOUND	Emple	oyer identification	number	
	- CHIVERSITY OF FOREI SCORE	91-0	564961		
Pa	Organizations Maintaining Donor Advised Funds or Other Similar Fo	unds o	or Accounts. Co	mplete	ıf the
	organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds	(1	b) Funds and other	account	<u> </u>
	Total number at end of year	<u> </u>	by railes and other	account	
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
1	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in writing that the assets held in don funds are the organization's property, subject to the organization's exclusive legal control?	nor advis	sed	Yes	No
ō	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds used only for charitable purposes and not for the benefit of the donor or donor advisor, or for all conferring impermissible private benefit		purpose	Yes	_ No
Pai	rt III Conservation Easements. Complete if the organization answered "Yes" t	o Form	990, Part IV, lın	e 7.	
L 2		certified	cally importantly la historic structure nservation	nd area	
			Held at the End	of the Y	ear
а	Total number of conservation easements	2a			
b	Total acreage restricted by conservation easements	2b			
c	Number of conservation easements on a certified historic structure included in (a)	2c			
d	Number of conservation easements included in (c) acquired after 8/17/06	2d			
3	Number of conservation easements modified, transferred, released, extinguished, or terminate the taxable year ▶	ed by the	e organization durin	ıg	
1	Number of states where property subject to conservation easement is located 🛌				
5	Does the organization have a written policy regarding the periodic monitoring, inspection, hand enforcement of the conservation easements it holds?	dling of		Yes	□ No
5	Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easem				
,	A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements	_	the year 🟲 \$		
3	Does each conservation easement reported on line $2(d)$ above satisfy the requirements of sec $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?		,	Yes	No
•	In Part XIV, describe how the organization reports conservation easements in its revenue and balance sheet, and include, if applicable, the text of the footnote to the organization's financial the organization's accounting for conservation easements	•	•	5	
ar	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	or Oth	er Similar Ass	ets.	
la	If the organization elected, as permitted under SFAS 116, not to report in its revenue stateme art, historical treasures, or other similar assets held for public exhibition, education or researc provide, in Part XIV, the text of the footnote to its financial statements that describes these it	ch ın fur			
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement a historical treasures, or other similar assets held for public exhibition, education, or research i provide the following amounts relating to these items				
	(i) Revenues included in Form 990, Part VIII, line 1		► \$		0
	(ii) Assets included in Form 990, Part X		► \$	534	,837
2	If the organization received or held works of art, historical treasures, or other similar assets for following amounts required to be reported under SFAS 116 relating to these items	or financ			
а	Revenues included in Form 990, Part VIII, line 1		► \$		0

b Assets included in Form 990, Part X

Par	Titl Organizations Maintaining Co	ollections of Art	, Hist	<u>orical Tre</u>	asures, or	Othe	er Similar Ass	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of the	following th	at are a sıgnıfı	cant (use of its collection	on	
а	Public exhibition		d	✓ Loan or	exchange pro	grams	5		
b	Scholarly research		e	✓ Other	Teaching mate	erial a	nd curricula to K-	12	
c	✓ Preservation for future generations								
4	Provide a description of the organization's c Part XIV	ollections and expla	ın how	they further	the organizati	on's e	xempt purpose ın		
5	During the year, did the organization solicit assets to be sold to raise funds rather than							Yes	√ No
Pai	t IV Escrow and Custodial Arrang	•		_		ed "\	es" to Form 99	90,	
1-	Part IV, line 9, or reported an ar			•					
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	ian or other interme	ediary to	or contributi	ons or other a	ssets	Г	Yes	✓ No
ь	If "Yes," explain the arrangement in Part XI	V and complete the	followir	ıg table					
							A mo	ount	
c	Beginning balance					1c			
d	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1 f			
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21?				되	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	V							
Pa	rt V Endowment Funds. Complete								
		(a)Current Year 195,505,393	(b)	Prior Year 244,480,093	(c)Two Years B	ack (c	1)Three Years Back	(e)Four Y	ears Back
1a	Beginning of year balance	7,418,474		6,736,634					
b	Contributions	28,616,915		-42,356,476					
C	Investment earnings or losses	5,580,841		4,945,674					
d e	Grants or scholarships Other expenditures for facilities	5,853,911		6,005,976					
-	and programs	3,000,511		0,000,570					
f	Administrative expenses	2,415,363		2,403,208					
g	End of year balance	217,690,667		195,505,393					
2	Provide the estimated percentage of the yea	ar end balance held a	as						
а	Board designated or quasi-endowment 🕨	37.7 %							
ь	Permanent endowment F 62.1 %								
c	Term endowment ► 0.2 %								
3a	Are there endowment funds not in the posse	ssion of the organiza	atıon th	at are held a	and administer	ed for	the		
	organization by						2-45	Yes	No
	(i) unrelated organizations						3a(i)	_	No
b	(ii) related organizations						3b	' 	110
4	Describe in Part XIV the intended uses of the	•				-			
Par	t VI Investments—Land, Building	s, and Equipme	nt. Se	e Form 99	0, Part X, lın	e 10.			
	Description of investment			(a) Cost or otloasis (investme			(c) Accumulated depreciation	(d) Boo	ok value
1a	Land			133,	500 10,4	64,139		1	0,597,639
b	Buildings		. [1,050,	000 176,6	37,698	60,426,007	11	7,261,691
c	Leasehold improvements		. [0	0	0		(
d	Equipment		. [0 17,4	08,716	7,781,765		9,626,951
е	Other		. [0 18,3	24,421	2,539,470	1	5,784,951

153,271,232

Part VII Investments—Other Securities. See F (a) Description of security or category			d of valuation
(including name of security)	(b)Book value		f-year market value
Financial derivatives			
Closely-held equity interests Other			
Endowment hedge funds	46,827,178		F
Endowment private equity	17,550,219		F
Endowment private real estate LPs & REITS	13,442,913		F
Endowment natural resources LPs	11,485,553		F
Endowment trusts with external trustees	1,675,298		F
Investment in subsidiary	7,700,926		F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	98,682,087		
Part VIII Investments—Program Related. See		1	d of valuation
(a) Description of investment type	(b) Book value		f-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	<u>l </u>		
(a) Description			(b) Book value
Assets restricted for investment in campus facilities Beneficial interest in outside trusts			7,468,591 1,625,934
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X	, line 25.		9,094,525
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes Government advances for student loans	13,514,845		
Unrealized loss on interest rate swaps	10,960,554		
Liabilities under split-interest agreements	2,784,880		
Asset retirement obligation Capital lease obligations	1,570,785		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	29,018,637		

Pal	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	139,899,538
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	138,899,739
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	999,799
4	Net unrealized gains (losses) on investments	4	24,413,388
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV)	8	3,365,123
9	Total adjustments (net) Add lines 4 - 8	9	27,778,511
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	28,778,310
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	131,169,069
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	-6,329,670
3	Subtract line 2e from line 1	3	137,498,739
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 2,132,054		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	2,400,799
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	139,899,538
	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	
1	Total expenses and losses per audited financial statements	1	102,390,759
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)		
e	Add lines 2a through 2d	2e	1,433,622
3	Subtract line 2e from line 1	3	100,957,137
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 2,132,054		
b	Other (Describe in Part XIV)	1	
С	Add lines 4a and 4b	4с	37,942,602
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	138,899,739

Part XIV Supplemental Information

SchD_P13_S00_L04b

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
SchD_P03_S00_L04	Schedule D, Part III, Line 4	The Slater Museum of Natural History The Slater Museum of Natural History, which is located on the university's campus in Thompson Hall, provides one of the region's significant repositories for bird, mammal, reptile, amphibian and plant specimens from the Pacific Northwest. The museum serves as resource for students, researchers, artists and educators alike. The museum plays a significant role in the university's biology program and is used by schools throughtout the south Puget. Sound area. Planned improvements to the museum will further strengthen the museum's role as a resource for community groups, to provide eductational programming, offer museum-based excursions, and support research initiatives. The Collins Memorial Library. The unique collections of the Collins Memorial Library cover a broad range of topics, formats and periods. The library's many unique materials include artists' books, manuscript collections, photographs, rare books, and materials that document local and regional history and art. The collections provide educational and research resources for students, faculty, and staff and support the university's commitment to teaching, learning, civic engagement and diversity.
SchD_P04_S00_L02b	Schedule D, Part IV, Line 2b	The university receives scholarship and fellowship funds from unrelated granting organizations and awards them to specific, named students as directed by the granting organizations. The university also acts as custodian for the funds of service organizations in which students, faculty, or staff participate. These organizations are legally separate from the university and are funded from sources independent of the university.
SchD_P05_S00_L04	Schedule D, Part V, Line 4	The university's endowment includes donor-restricted endowment and funds designated by the Board of Trustees to function as endowment (quasi-endowment) The university's donor-restricted endowment was created through the generosity of generations of donors who requested that their gifts be invested for a period of time or in perpetuity to provide resources to support the university's mission. The university's quasi-endowment was created by the Board of Trustees through their designation of unrestricted bequests and careful stewardship of other unrestricted resources. The purpose of the endowment is to provide ongoing financial support for the university's annual operations. The university recognizes that support for current operations must be consistent with the long-term growth of the endowment. Over time the university's goal is to grow the endowment through careful investment and through the addition of new gifts, while providing steadily growing support to university programs across generations.
SchD_P10_S00_L00	Schedule D, Part X	The university had no unrecognized tax benefits that would have required an adjustment to its net assets, and no unrecognized tax benefits, at July 1, 2009, or at June 30, 2010 In general the university is no longer subject to U S federal and state income tax examinations by tax authorities before its fiscal year ended June 30, 2005
SchD_P11_S00_L08	Schedule D, Part XI, Line 8	A ctuarial adjustments and other changes (\$1,419,058),investment gain from subsidiary \$1,478,893, and gain on revaluation of asset retirement obligations \$3,305,288
SchD_P12_S00_L02d	Schedule D, Part XII, Line 2d	Investment gain from subsidiary \$1,762,202, student financial aid (\$35,810,548), and gain on revaluation of asset retirement obligation \$3,305,288
SchD_P12_S00_L04b	Schedule D, Part XII, Line 4b	Investment loss of subsidiary \$283,309 and fundraising and gaming expenses (\$14,564)
SchD_P13_S00_L02d	Schedule D, Part XIII, Line 2d	A ctuarial adjustments and other changes \$1,419,058 and fundraising and gaming expenses \$14,564
Cabb D12 C00 L04b	Schodula D. Dart VIII Lina 4h	Student financial aid \$35,910,549

Schedule D, Part XIII, Line 4b

Student financial aid \$35,810,548

Employer identification number

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

THE UNIVERSITY OF PUGET SOUND

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

	91-0564961			
			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 publishes its nondiscriminatory policy toward students annually in a newspaper under guidelines set forth in Rev Proc 75-50, 1975-2 C B 587 Section 4 03 The university also includes this nondiscriminatory statement in publications dealing with student admissions, programs, and scholarships			
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)			
5	Does the organization discriminate by race in any way with respect to	-		
	Students' rights or privileges?	5a		Νo
b	Admissions policies?	5b		Νo
С	Employment of faculty or administrative staff?	5с		Νo
d	Scholarships or other financial assistance?	5d		Νo
е	Educational policies?	5e		Νo
f	Use of facilities?	5f		Νo
g	Athletic programs?	5g		Νo
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990)	5h		Νo
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990) 🝠 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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DLN: 93493131025341

2009

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OMB No 1545-0047

SCHEDULE F (Form 990)

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

Statement of Activities Outside the United States

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
THE UNIVERSITY OF PUGET SOUND

 ${\bf Employer\ identification\ number}$

91-0564961

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

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

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

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

Activites per Region (o:	se Schedule i - 1	(I UIIII 990) II aut	illional space is needed)		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean	0	0	Grantmaking		35,775
East Asia and the Pacific	0	0	Grantmakıng		58,272
Europe (including Iceland and Greenland)	0	0	Grantmakıng		162,711
North America (including Canada and Mexico, but not the United States)	0	0	Grantmakıng		20,100
Sub-Saharan Africa	0	0	Grantmakıng		26,965
South America	0	0	Grantmakıng		6,000
North America (including Canada and Mexico, but not the United States)	0	0	Grantmaking		74,802
Europe (including Iceland and Greenland)	1	1	Program Services	Study Abroad Program	169,474
South America	0	0	Program Services	Study Tour	20,378
East Asia and the Pacific	0	0	Program Services	Study Tour	18,951
East Asia and the Pacific	0	0	Program Services	Faculty travel to conferences and professional meetings	33,094
Europe (including Iceland and Greenland)	0	0	Program Services	Faculty travel to conferences and professional meetings	24,309
North America (including Canada and Mexico, but not the United States)	0	0	Program Services	Faculty travel to conferences and professional meetings	12,961
South America	0	0	Program Services	Faculty travel to conferences and professional meetings	1,528
Central America and the Caribbean	0	0	Investments	-	
Totals ▶	1	1			665,320
For Privacy Act and Paperwork Re	eduction Act Notic	ce, see the Instruc	tions for Form 990.	Cat No 50082W Sche	edule F (Form 990) 2009

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(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)
		North America (including Canada and Mexico, but not the United States)	Research	74,802	Check			
2 Enter total nu tax-exempt b	I mber of recipi y the IRS, or t	lent organizations lis for which the grante	l ted above that are i e or counsel has pro	l recognized as charii ovided a section 50:	l ties by the foreign c 1(c)(3) equivalency	ountry, recognized letter	as . ►	1

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,

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

Use Schedule	F-1 (Form 990) ıf ad	dıtıonal space	ıs needed.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Financial aid grants posted to each student's Puget Sound account when students were studying abroad that term	Central A merica and the Caribbean	4	,	Aid posted to student account held at the university			
account when students were studying abroad that term	Pacıfic	6	,	Aid posted to student account held at the university			
Financial aid grants posted to each student's Puget Sound account when students were studying abroad that term	Europe (including Iceland and Greenland)	21	162,711	Aid posted to student account held at the university			
Financial aid grants posted to each student's Puget Sound	North America (including Canada and Mexico, but not the United States)	3	20,100	Aid posted to student account held at the university			
Financial aid grants posted to each student's Puget Sound account when students were studying abroad that term	Sub-Saharan Africa	2	·	Aid posted to student account held at the university			
Financial aid grants posted to each student's Puget Sound account when students were studying abroad that term	South America	2		Aid posted to student account held at the university			
Fellowship grant posted to student's Puget Sound account when student was studying abroad that term	East Asia and the Pacific	1	17,817	Wire Transfer			

	Supplemental Infor		
	Complete this part to Identifier	provide the information required ReturnReference	In Part I, line 2, and any additional information. Explanation
SchF_P01_S0		Schedule F, Part I, Line 2	Student financial aid grants - All students seeking need based financial assistance are required to complete the FAFSA Eligibility, or need, is determined through federal methodology and resulting Expected Family Contribution as set against standard cost of attendance. Need based aid is awarded based on federal and/or state eligibility requirements and institutional aid is awarded according to institutional policy. Amounts of aid awarded are in compliance with governing regulations or institutional policy. In compliance with Title IV regulations, total aid from all sources cannot exceed need or the annual cost of attendance, whichever is less. Institutional policy prohibits institutional aid from exceeding the total cost of tuition, regardless of the level of need. Aid awards are posted to student accounts as an offset to semester charges. Institutional policy prohibits the release or refund of aid to students unless total charges for the semester have been paid.
SchF_P01_S0	O_L03	Schedule F, Part I, Line 3	The university's financial statements are accounted for on an accrual basis of accounting. As such, the expenditures reported by region in column (f) are accounted for on an accrual basis and do not include expenditures that were accrued in a prior reporting period. Under the university's current accounting procedure, indirect and direct expenses associated with certain activities outside the United States are not separately tracked and are therefore not included in column (f)
SchF_P03_S0	0_L00	Schedule F, Part III	The number of recipients reported in column (c) were actual numbers obtained from the university's Student Financial Services This department keeps a record of cash grants and the recipients
-			

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DLN: 93493131025341

OMB No. 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Employer identification number Name of the organization THE UNIVERSITY OF PUGET SOUND Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Internet and e-mail solicitations Solicitation of government grants Special fundraising events Phone solicitations In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table (iii) Dıd fundraiser have (v) A mount paid to (vi) A mount paid to (i) Name of individual (iv) Gross receipts (or retained by) custody or (ii) Activity (or retained by) or entity (fundraiser) fundraiser listed in control of from activity organization contributions? col (i) No Yes

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

Pai	rt II	Fundraising Events. Com more than \$15,000 on Form					report	ted
			(a) Event #1 Auction (event type)	(b) Event #2 Golf Tournament (event type)	(c) O ther Events 0 (total number)	(d) Tot (Add col		
ΕR	1	Gross receipts	6,234	7,698			1	3,932
Revenue	2	Less Charitable contributions	4,338	4,750				9,088
<u> </u>	3	Gross income (line 1 minus line 2)	1,896	2,948				4,844
	4	Cash prizes	О	0				0
မာ	5	Non-cash prizes	2,075	0				2,075
Expenses	6	Rent/facility costs	C	4,260				4,260
	7	Food and beverages	956	1,345				2,301
DIRect Direct	8	Entertainment	O	0				0
Δ	9	Other direct expenses .	862	1,093				1,955
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)	🛌		1	0,591
	11	Net income summary Combine III	<u> </u>					5,747
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted mor	e thar	1
Revenue	_		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tot (Add col co		
	1	Gross revenue						
ses	2	Cash prizes						
Expenses	3	Non-cash prizes						
	4	Rent/facility costs						
Direct	5	Other direct expenses						
	6	Volunteer labor	Г Yes	Г Yes <u>%</u> Г No				
		Direct expense summary Add lines Net gaming income summary Com						
9 a b	Is t	er the state(s) in which the organiza he organization licensed to operate No," Explain				· 9a	Yes	No
10a b		re any of the organization's gaming Yes," Explain	licenses revoked, suspen	ded or terminated during	the tax year?	10a		
11 12	Is t	es the organization operate gaming a he organization a grantor, beneficia ned to administer charitable gaming	ry or trustee of a trust or	a member of a partnersh	ıp or other entity	. 11	-F7\ 24	
					January of Light		, _0	

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

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DLN: 93493131025341 OMB No 1545-0047

(Form 990)

Department of the Treasury

Schedule I

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 PUGET	SOUND					91-0564961	
Part I General Info	rmation on Gran	nts and Assistance					
 Does the organization m the selection criteria us Describe in Part IV the 	ed to award the gran	ts or assistance?					√ Yes ┌ I
Part II Grants and O Form 990, Part	ther Assistance IV, line 21 for an	to Governments and y recipient that receive 990) if additional space	Organizations in d more than \$5,000	the United States . Check this box if n	o one recipient receiv	ed more than \$5,00	0. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) 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 number of se	ction 501(c)(3) and	government organizations					<u> </u>
3 Enter total number of ot						.	

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)N umber of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Student Financial Aid Grants	2607	35,555,072			
Student Research Grants	154	223,930			
Faculty Research Grants	24	26,090			
Other Student Grants and Allocations	260	78,897			

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

Return Reference	Explanation
	Student Financial Aid Grants - All students seeking need based financial asistance are required to complete the FAFSA Eligibility, or need, is determined through federal methodology and resulting Expected Family Contribution as set against standard cost of attendance. Need based aid is awarded based on federal and/or state eligibility requirements and institutional aid is awarded according to institutional policy. Amounts of aid awarded are in compliance with governing regulations or institutional policy. In compliance with Title IV regulations, total aid from all sources cannot exceed need or the annual cost of attendance, whichever is less. University policy prohibits institutional aid from exceeding the total cost of tuition, regardless of the level of need. Aid awards are posted to student accounts as an offset to semester charges. University policy prohibits the release or refund of aid to students unless total charges for the semester have been paid. Research Grants - Research grants awarded to students and faculty are made in accordance with established written criteria and eligibility guidelines. Proposal applications are reviewed and awards are granted based on the quality, feasibility, and merits of the research proposed. Student grant awards are generally paid by check and faculty grant awards are transferred to an institutional account from which funds are drawn in reimbursement of actual expenditures which must be substantiated. All research grants require a final report and faculty research grants additionally require a financial accounting. Other Student Grants and Allocations - This includes awards, prizes, and other payments to students in recognition of academic achievements.
	Schedule I, Part I, Line 2

DLN: 93493131025341

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Compensation Information

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

THE	UNIVERSITY OF PUGET SOUND					
			91-0564961			
Pai	t I Questions Regarding Compensation		·			
	<u> </u>				Yes	No
1a	Check the appropriate box(es) if the organization provide 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel	·				
	Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organ reimbursement orprovision of all the expenses describe			1b	Yes	
2	Did the organization require substantiation prior to reim officers, directors, trustees, and the CEO/Executive Directors			2	Yes	
3	Indicate which, if any, of the following the organization u organization's CEO/Executive Director Check all that a Compensation committee		y Written employment contract			
	·	굣	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part or a related organization	: VII	I, Section A, line 1a with respect to the filing organizati	on		
а	Receive a severance payment or change-of-control pay	men	nt?	4a		Νo
ь	Participate in, or receive payment from, a supplemental	non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based	d co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provid	de th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must c					
5	For persons listed in form 990, Part VII, Section A, line compensation contingent on the revenues of	: 1a,	did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, line compensation contingent on the net earnings of	1a,	did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line payments not described in lines 5 and 6° If "Yes," desc			7		No
8	Were any amounts reported in Form 990, Part VII, paid subject to the initial contract exception described in Re in Part III	or a	occured pursuant to a contract that was	8		No
9	If "Yes" to line 8 did the organization also follow the rel	hutts	able presumption procedure described in Regulations			

section 53 4958-6(c)?

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		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and		(E) Total of columns	
		(i) Base (ii) Bonus & incentive compensation compensation		(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Kristine M Bartanen	(1) (11)	194,937 0	0	,	28,173	l .	230,543	
David R Beers	(1) (11)	207,211	0 0	1,500	39,777	39,948 0	288,436	
George H Mills Jr	(1) (11)	170,280 0	0	1,500 0	20,434	5,495 0	197,709	
Sherry B Mondou	(1) (11)	219,060 0	0	1,500 0	40,192	5,654 0	266,406	
J Mıchael Segawa	(1) (11)	131,150 0	0	_/	15,738	5,386 0	5 153,774 0 0	
Ronald R Thomas	(1) (11)	382,486 0	0 0	_/	141,167	16,428 0	543,066	
David N Balaam	(1) (11)	46,281 0	0	221,303 0	6,214	933 0	274,731 0 0	
Kenneth W Rousslang	(1) (11)	0	′ા	195,865 0	0 0	33,012 0	2 228,877	
Christine Kline	(1) (11)	78,801 0	0	71,049 0	9,569	4,536 0	163,955	
John M Hickey	(I) (II)	144,170	0 0	1,451	17,226			
							-	
							,	
			<u> </u>	<u> </u>		<u> </u>	<u>'</u>	
	'	 	 	 				+

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	Ret urn Ref erence	Explanation
	Part I, Line 1a	First-class or charter travel. The president is the only position reported in Form 990, Part VII for which the university paid or reimbursed business or first-class travel. The university did not utilize chartered flights for air travel. Extensive travel is required of the position of president and s/he is encouraged by the Board of Trustees to travel business or first class on flights of two hours or more. This provision is made for several reasons. (1) business or first-class travel allows for the most flexibility to accommodate a travel schedule that must frequently be altered, often at the last minute to accommodate donors' schedules, add critical meetings, or to take advantage of other strategic opportunities for the university, (2) circumstances sometimes call for the president to return to campus without notice, or to remain on campus when a trip was planned, and first or business-class travel best accommodates these changing conditions, and (3) the Board of Trustees wishes the president to be at his or her best performance representing and seeking funding for the university during often grueling travel itineraries for meetings frequently critical to the institution's well-being. Housing allowance or residence for personal use. The president is required to live on campus in the university-owned president's residence where he regularly holds university events. Because the president accepts this requirement as a condition of employment, the residence is on university premises, and it is provided for the convenience of the university, under IRS rules it is not taxable to the president. As required by IRS form 990 instructions, the value of the portion of the residence used by the president for living quarters has been estimated and is included in the amounts reported in Form 990, Part VII, Column F, and in Form 990, Schedule J, Part II, Column D. The university owns several houses on campus that are used for qualified campus lodging Faculty and staff members who rent these houses typically pay adequate rent
SchJ_P01_S00_L04	Part I, Line 4	Persons who participated in a supplemental nonqualified retirement plan, including a reasonable estimate of their potential share of the increase in actuarial value of the faculty early retirement and career change plan and the postretirement medical plan Ronald R Thomas (\$111,767), Sherry B Mondou (\$12,952), David R Beers (\$14,318), Kristine M Bartanen (\$4,200) Persons who received payment from a supplemental nonqualified retirement plan David N Balaam (\$221,303), Kenneth W Rousslang (\$200,430), Christine Kline (\$73,311)

Schedule K

(Form 990)

THE UNIVERSITY OF PUGET SOUND

Part T Bond Issues

DLN: 93493131025341

OMB No 1545-0047

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.

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

91-0564961

123	Bona Issues													
	(a) Issuer Name (b) Issuer EIN		(c) CUSIP #	(d) Date Issued		(e) Issue	e Price	(f) Des	cription of	Purpose	(g) Defeased		(h) O n Behalf of Issuer	
-											Yes	No	Yes	No
A	Washington Higher Education Facilities Authority 91-1306482 939781WU0 (WHEFA)			06-30-2006		30,0	30 000 000 1.		Finance the contruction and renovation of campus facilities			x		Х
В	Washington Higher Education Facilities Authority 91-1306482 939781WT3 (WHEFA)			06-30-2006		22,:	22 360 066 1		To advance refund outstanding WHEFA revenue bonds			х		Х
Pa	rt III Proceeds				•			I.						
					4	E	3	(:	D)		E	
1	Total proceeds of issue				0		(0						
2	2 Gross proceeds in reserve funds				0		(0						
3	3 Proceeds in refunding or defeasance escrows				0		(0						
4	4 Other unspent proceeds				0		(0						
5	5 Issuance costs from proceeds				0		(0						
6	6 Working capital expenditures from proceeds				0		(0						
7	Capital expenditures from proceed	ds			0		(0						
8	Year of substantial completion			2008		2001						•		
				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	ıssue [?]		х	Х								
11	Has the final allocation of proceed	ds been made?		Х		Х								
12	Does the organization maintain ac final allocation of proceeds?	dequate books and re	cords to support the	Х		х								
Pa	TIIII Private Business Use			ı		_								
				<u> </u>	 	3	_		D			E		
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
1	Was the organization a partner in which owned property financed by		ember of an LLC,		Х									
2	Are there any lease arrangements which may result in private busine		х											
For	Privacy Act and Paperwork Reduction A	ct Notice, see the Instr	ructions for Form 990.			Cat No 50	0193E				Schedule	K (Form	990) 20	09

Part III Private Business Use (Continued)

	111vate basiness ese (continued)		Δ	F	2	1 4	<u> </u>	Ι .	D			_
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	l No	_
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		Х									_
3b	Are there any research agreements with respect to the financed property which may result in private business use?	х										
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										
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 %									
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 %									
6	Total of lines 4 and 5		0 %									
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х										
Da	TITY Arbitrage			-			-					

Part IV Arbitrage

			Α		В		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?		x		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?	x		х							
b	Name of provider	Bank of NY	Mellon	Bank of NY	Mellon						
С	Term of hedge		30 3		22 5						
4a	Were gross proceeds invested in a GIC?	Х			Х						
b	Name of provider	Trinity Plus Company Ll									
С	Term of GIC		2 1								
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						
i									Calaadiil	- K /F 000	1) 2000

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Transactions with Interested Persons

▶ 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.

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

DLN: 93493131025341

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service Name of the organization
THE UNIVERSITY OF PUGET SOUND

Employer identification number

							9	1-05649	61			
Part I Excess Benefit Tran										40h		
Complete if the organizat			Yes on Form 99	90, F	art IV, line 25a (or 250	, or Form	990-EZ,	Part V, II		Corr	ected?
1 (a) Name of disqu	ualıfıed	person			(b) Desc	rıptıoı	oftrans	action		Ye		No
										- ``		
			<u></u>							<u> </u>		
2 Enter the amount of tax impos section 4958		-	_					ear unde	r • s			
3 Enter the amount of tax, if any								•	• \$			
									T			
Part II Loans to and/or I						_						
Complete if the organiz	zation a	nswered	1 "Yes" on Form	1990), Part IV, line 26	, or Fo	rm 990-1	: Z , Part V (f)		а 		
(-) N		oan to m the	(-)0 1			(e)	In	Appro		(g)Wi	rıtter	ו
(a) Name of interested person and purpose	1	zation?	(c)O riginal principal amol		(d)Balance due	defa	ult?	by board or		agreer	igreement?	
	To	From				Yes No		commit Yes	No No	Yes	$\overline{}$	No
	10	FIUIII				165	110	res	140	res	+	110
											+	
Гotal				•								
Part III Grants or Assistar Complete if the orga						/ lino	27					
Complete if the orga	IIIZauc				en interested per		27.					
(a) Name of interested pers	on	(•		ganization	5011	(c) A m	ount of g	rant or ty	pe of as	sısta	ance
Student financial assistance		Stu	dent financial as	ssıst	ance		\$3,000 1	1erit sch	olarship			
Student financial assistance		Stu	dent financial as	ssıst	ance		\$4,500 Research grants					
Student financial assistance		Stu	dent financial as	ssıst	ance		\$1,000	ravelgra	nts			
Part IV Business Transact	ione l	[nyoly	ing Interest	<u> </u>	Dersons							
Complete if the orga						, lıne	28a, 28	b, or 28	c.			
			Relationship		,					(e)) Sha	ring of
(a) Name of interested persoi	า	betw	een interested		(c) A mount of		(d) Desc	ription of	transactı	^		ation's
(a) Name of merested person			rson and the rganization		transaction		. ,	•		Ye		ues?
Nancy Beers			member of	+	36,2	65 C	ompensa [.]	ion		' '		N o
valley Beers			stee officer		30,2		ompensa					
			ed by the									
		univers A dmis	•									
		Recept	ionist									
Mary Thomas			member of		24,6	12 C	ompensa	tion				Νo
		1	employed by the sity as Special	e								
		Assoc	ate to the Chair	r								
		of the I	Board	+		+						
		1		_								

SCHEDULE M (Form 990)

NonCash Contributions

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization THE UNIVERSITY OF PUGET SOUND **Employer identification number**

91-0564961

Pa	rt I	Types of Property								
			(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1 g		Method of	d) determi nues	nıng	
1	A rt—V	Vorks of art	Х	2	-	Estima	ated FMV			
		listorical treasures .			71,200	Locinii	ated 1117			
		ractional interests								
4		and publications								
-	Clothi	ng and household	×		1.049	F - 4:	ated FMV			
c	goods	and other vehicles				ESTITIO	ated FMV			
		and planes								
		ectual property								
		ities—Publicly traded .	X	43	411,803	Marko	t value			
		ities—Publicity traded . ities—Closely held stock .		43	411,803	Marke	t value			
	Secur	ities—Closely field stock . ities—Partnership, LLC, st interests								
12		ities—Miscellaneous								
	Q ualıf contr	ied conservation ibution—Historic								
14	Q ualıf	tures								
15		state—Residential .								
16	Reale	state—Commercial								
17	Reale	state-Other								
18	Collec	tibles								
19	Foodı	nventory								
20	Drugs	and medical supplies .								
21	Taxide	ermy								
22	Histor	rical artifacts								
23	Scient	tific specimens								
24	Arche	ological artifacts								
25	Other	Equip & ► (supplies)	x	20	50,928	Estima	ated FMV			
		Gıft								
		► (<u>certificates</u>)	Х	79			of certificat	es		
		► (Event tickets)	X	2	300	Value	oftickets			
	Other	`								
29		per of Forms 8283 received nich the organization compl				29				0
20-	Durin	g the year, did the organiza	tion rocally	a hy contribution any propo	rty reported in Bart I. lines	1 20 4	that it		Yes	No
Jua		hold for at least three years								
		empt purposes for the entire			on, and which is not require	a to be	useu			No
								30a		No
ъ 31		es," describe the arrangeme the organization have a gif			eview of any non-standard	contrib	outions?	31	Yes	
∍∠a		the organization hire or use ibutions?	e tilira parti	es or related organizations	· · · · · · · · ·	ion-ca	> i	32a	Yes	
Ь	If"Ye	es," describe in Part II								
33		organization did not report ribe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a) is che	ecked,			

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	Explanation
SchM_P01_S00_L00	Schedule M, Part I	Column B The number of contributions represents a combination of the number of items received and the number of contributions received For publicly traded secruities, the number represents each gift of stock and not the number of shares received
SchM_P01_S00_L32b	Schedule M, Part I, Line 32b	The university utilizes third parties, such as brokers, auctioneers, or dealers, to assist in cost-effective liquidation of gifts of securites and real and tangible property, as appropriate, and to maximize the net gift received. The university has no related organizations that perform this function

Schedule M (Form 990) 2009

Software ID: **Software Version:**

EIN: 91-0564961

Name: THE UNIVERSITY OF PUGET SOUND

As Filed Data -

DLN: 93493131025341 OMB No 1545-0047

Inspection

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE 0

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.

Name of the organization THE UNIVERSITY OF PUGET SOUND

(Form 990)

Department of the Treasury

Internal Revenue Service

Employer identification number

91-0564961

ldentifier	Return Reference	Explanation
F990_P06_S0A_L02	l '	1 Michael J Corliss, Board member and Carl G Behnke, Board Member, business relationships 2 Michael J Corliss, Board member and George E Matelich, Board Member, business relationships 3 Michael J Corliss, Board member and Matthew M Kelleher, Board Member, business relationships 4 Michael J Corliss, Board member and Robert C Pohlad, Board Member, business relationships 5 Carl G Behnke, Board member and George E Matelich, Board Member, business relationships

ldentifier	Return Reference	Explanation
F990_P06_S0B_L11	Form 990, Part VI, Section B, Line 11	The preparation and review process for The University of Puget Sound's Form 990 and required schedules is designed to produce a complete and accurate return filed on time with the IRS. The Form 990 and required schedules are prepared by qualified staff from audited financial statement data or from data provided by university personnel responsible for preparing or maintaining such information. The Form 990 and required schedules are subjected to three levels of review before they are filed with the IRS. Two non-trustee financial officers, the controller, who is a CPA, and the chief financial officer, review the form and required schedules. The Form 990 and required schedules, along with interpretive commentary prepared by non-trustee financial officers, are provided to each voting member of the Board of Trustees (university's governing body). Any changes identified during review are made and confirmed by a non-trustee financial officer before the Form 990 and required schedules are filed with the IRS. The filed Form 990 and required schedules are reviewed annually by the Audit Committee of the Board of Trustees Additionally, the Compensation Committee of the Board of Trustees conducts an annual review of compensation-related disclosures in the Form 990 and required schedules.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L12c		Annually non-trustee officers and the Board of Trustees meet compliance requirements with a Conflict of Interest questionnaire and the office of the Secretary of the Board of Trustees monitors and manages responses

ldentifier	Return Reference	Explanation
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	The university follows the rebuttable presumption of reasonableness procedures identified in Treasury Regulation section 53 4958-6, which require the following three conditions to be met 1 All elements of compensation (compensation arrangements) are approved in advance by an authorized body which is the governing body, a committee of the governing body or other parties authorized by the governing body of the organization who do not have a conflict of interest with respect to the compensation arrangements 2 Prior to making the determination, the authorized body obtains and relies upon appropriate data as to comparability 3 The authorized body adequately documents the basis for its determination regarding compensation arrangements concurrently with making the decision. The procedures were used in determining the fiscal year 2009-2010 compensation of the president (CEO), other officers or key employees. This process is regularly undertaken for each such person anytime his/her compensation changes.

ldentifier	Return Reference	Explanation
F990_P06_S0C_L19	Section C, Line 19	The governing documents and conflict of interest policy will be available upon request subject to approval by the Chair of the Board of Trustees. The financial statements of the university are available on the website and a paper format is available upon request.

ldentifier	Return Reference	Explanation
F990_P07_S0A_L01a	Form 990, Part VII, Section A, Line 1a	Column (B) Average hours per week 40 hours reflect a full-time position, typically actual hours significantly exceed 40 Column (D) Reportable compensation from the organization Compensation reported for David N Balaam includes early retirement benefits Compensation reported for Kenneth W Rousslang includes early retirement benefits Compensation reported for Christine Kline includes early retirement benefits Compensation reported for Carl DeCree includes transition compensation Column (F) Estimated amount of other compensation from the organization Benefits reported for David R Beers include dependent tuition benefits Benefits reported for Kenneth W Rousslang include dependent tuition benefits and post-retirement medical benefits Benefits reported for Christine Kline include post-retirement medical benefits

DLN: 93493131025341

OMB No 1545-0047

2009

Open to Public Inspection

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization
THE UNIVERSITY OF PUGET SOUND

91-0564961

Part I Identification of Disregarded Entities (Complete	ıf the organızatıon a	answered "Yes" on	Form 990, Part	IV, line 33.)	
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Rainier Heights Holdings LLC 600 University Street Suite 600 Seattle, WA 98101	Accept, manage and liquidate real estate	WA	0	381,452 N	N/A
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the		ne organization an	swered "Yes" on	Form 990, Part IV	, line 34 because it had one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sectio	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
Northwest Academic Computing Consortium Inc					
3203 SE Woodstock Blvd STE 326 Portland, OR 972028199 84-1172799	Develop and use advanced technology	OR	501(c)(3)	11e Type 1	1 N/A
Car Drivery Act and Denominary Reduction Act Notice and the Instructions	for Form 000	Cat No E0135	· · ·	•	Schodulo B / Form 000\ 2000

art III		_	zations Taxable as organizations treated	- `		Yes" on Fori	m 990, Part IV, line	34
	_	 (c)		(e)	 	(h)	(i)	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr	al or ging
		Country)		514)							
							Yes	No		Yes	No

Part IV

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

					7 7						
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership				
CVI GVF Holdings 13 Ltd PO Box 309GT Ugland House S Church St Georgetown KY1-1104 CJ	Hold endow invest	CJ	N/A	С	1,762,202	8,210,623	1 00 %				

(6)

Part V	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV,	line 34, 35, or 36.)					
Not	e. Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No		
1 During	the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-I	٧۶					
a Re	eipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		No		
b Gif	, grant, or capital contribution to other organization(s)		1b	Yes			
c Giff	c Gift, grant, or capital contribution from other organization(s)						
d Loa	d Loans or loan guarantees to or for other organization(s)						
e Loa	ns or loan guarantees by other organization(s)		1e		No		
f Sal	e of assets to other organization(s)		1f		No		
	chase of assets from other organization(s)		1g		No		
	change of assets		1h		No		
	se of facilities, equipment, or other assets to other organization(s)		1 i		No		
j Lea	se of facilities, equipment, or other assets from other organization(s)		1 j		No		
k Pe	formance of services or membership or fundraising solicitations for other organization(s)		1k		No		
I Per	l Performance of services or membership or fundraising solicitations by other organization(s)						
m Sha	m Sharing of facilities, equipment, mailing lists, or other assets						
n Sh	aring of paid employees		1n		No		
o Re	mbursement paid to other organization for expenses		10		No		
p Re	mbursement paid by other organization for expenses		1р		No		
q Ot	ner transfer of cash or property to other organization(s)		1q		No		
r Oth	er transfer of cash or property from other organization(s)		1r		No		
	ne answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationshi	ps and transaction thres	sholds				
	(a) Name of other organization	(b) Transaction type(a-r)	(Amount	c) involve	d		
(1) CVI GV	F Holdings 13 Ltd	b		1,52	4,950		
	Itional Data Table						
(2)							
(3)							
(4)							
(5)							

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

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

(a) Name, address, and EIN of entity	(state or foreign partners end-of-year country) section assets 501(c)(3) organizations?			r) ortionate tions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h Gene mana part	agın tner?			
			Yes	No		Yes	No		Yes	N
									+-	╁
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Software ID: Software Version:

EIN: 91-0564961

Name: THE UNIVERSITY OF PUGET SOUND

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

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per		tion (that a	che	')			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) 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		
Carl G Behnke Board Member	2 3	x						0	0	0		
Richard M Brooks '82 Board Vice Chair	2 3	Х		х				0	0	0		
William M Canfield '76 P'08 Board Member	2 3	Х						0	0	0		
Marvin H Caruthers P'02 Board Member	2 3	Х						0	0	0		
Bradbury F Cheney '82 Board Member	2 3	Х						0	0	0		
Mıchael J Corliss '82 P'13 Board Member	2 3	Х						0	0	0		
Lowell Daun '68 Board Member	2 3	Х						0	0	0		
Hillis S Dillon '84 JD '88 Board Member	2 3	X						0	0	0		
Kathleen A Duncan '82 Board Member	2 3	Х						0	0	0		
Randolph C Foster '74 Board Member	2 3	Х						0	0	0		
Frederick W Grimm '78 Board Member	2 3	Х						0	0	0		
Matthew M Kelleher '79 Board Member	2 3	Х						0	0	0		
Thomas E Leavitt '71 JD '75 P'10 Board Member	2 3	Х						0	0	0		
Gwendolyn H Lillis P'05 Board Member	2 3	Х						0	0	0		
Eric Lindgren Board Member	2 3	Х						0	0	0		
George E Matelich '78 Board Treasurer	2 3	Х		х				0	0	0		
William D McCormick P'97 Board Member	2 3	Х						0	0	0		
Kenneth C McGill '61 Board Member	2 3	Х						0	0	0		
William C Nelson '69 Board Member	2 3	Х						0	0	0		
Jıll T Nıshı '89 Board Member	2 3	Х						0	0	0		
Deanna W Oppenheimer '80 P'11 Board Chair	2 3	Х		х				0	0	0		
Wade H Perrow '73 P'02 Board Member	2 3	Х						0	0	0		
John C Pierce '65 P'94 P'97 Board Member	2 3	Х						0	0	0		
Robert C Pohlad P'07 Board Member	2 3	Х						0	0	0		
Allan D Sapp '78 P'10 Board Member	2 3	Х						0	0	0		

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

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours	Posi t	((tion (hat a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
Robert T Shishido '72 P'09 Board Member	2 3	Х						0	0	0		
Gillian Neukom Toledo '94 Board Member	2 3	Х						0	0	0		
Barbara S Walker P'05 P'07 Board Member	2 3	Х						0	0	0		
Peter K Wallerich P'77 Board Vice Chair	2 3	Х		х				0	0	0		
William T Weyerhaeuser Board Member	2 3	Х						0	0	0		
John A Whalley '64 Board Member	2 3	Х						0	0	0		
Kenneth W Willman '82 Board Member	2 3	Х						0	0	0		
Ronald R Thomas President & Trustee	40	Х		х				385,471	0	146,007		
Kristine M Bartanen Academic VP and Dean	40			х				196,791	0	33,013		
David R Beers VP for University Relations	40			х				208,711	0	78,952		
Mary Elizabeth Collins Executive Assistant	40			х				85,898	0	16,072		
Katherine W Davis AVP for Treasury	40			х				104,233	0	17,307		
Janet S Hallman Controller	40			х				105,463	0	17,944		
George H Mills Jr VP for Enrollment	40			х				171,780	0	25,274		
Sherry B Mondou VP for Finance and Admin	40			х				220,560	0	45,032		
J Mıchael Segawa Dean of Students	40			х				132,650	0	20,578		
David N Balaam Professor	40					х		267,584	0	6,964		
Kenneth W Rousslang Professor	40					х		195,865	0	33,012		
Christine Kline Professor	40					х		149,850	0	13,905		
John M Hickey AVP Business Servs	40					х		145,621	0	19,151		
Carl DeCree Professor	40					х		134,625	0	8,082		