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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 **2009** Open to Public

Check tagstacks Please	For the 2009	calendar year, or tax year beginning 07/01/09 and ending 06/30/1			1 mapechon
Secondary Sec		Please C Name of organization		D Employ	er identification number
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Tax-exempt status X S01(c) (3)					
Tax-exempt status				included	7 Yes !
Website	Town support of			If "No," a	ittach a list (see instructions)
Part Summary				H(c) Group e	remotion number
Part Summary Briefly describe the organization's mission or most significant activities To educate and equip young people from all nations in integrity, personal life skills, and business skills to be multiplied around the world. 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 5 5 0 6 Total number of volunteers (estimate if necessary) 6 5 Total number of ordinaters (estimate if necessary) 6 5 Total number of volunteers (estimate if necessary) 6 5 Total number of volunteers (estimate if necessary) 6 5 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a 7b 7a 7a 7a 7a 7a 7a			Year of formation 1		
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Binefly describe the organization's mission To educate and equip young people from all nations in integrity, personal life skills, and business skills to be multiplied around the world. 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 90-EZ? 1 "Yes," describe these mes services on Schedule O 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services by expenses services? 1 "Yes," describe these changes on Schedule O 4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported 4a (Code) (Expenses \$ 11,369,923 including grants of \$ 1,852,928) (Revenue \$ 11,134,983 This is a University serving seven different areas of education including field work in countries around the world. There are 4 quarters per year of 250 plus students per quarter.		UNIVERSITY OF		99-0240539	Page 2
To educate and equip young people from all nations in integrity, personal life skills, and business skills to be multiplied around the world. 2 Dd the organization undertake any significant program services during the year which were not listed on the program services on Schedule O 3 Dd the organization cease conducting, or make significant changes in how it conducts, any program services by expenses services? 1 "Yes," describe these changes on Schedule O 2 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c(s) and 5					~
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7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II					7.7
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8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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 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 II 11 Is the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V II 11 IX 11 IX 12 Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part V II 12 Did the organization report an amount for investments—other securities 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 V II 13 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 V II 14 Did the organization report an amount for other liabilities 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 X III 15 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X III 16 Did the organization oreport an amount for other assets relatements for the tax year include a footnote that addresses the organization separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III 17 Did the organization oreport an existing an addited financial statements for the tax year? If "Yes," complete Schedule D, Part X III 18 Did the organization maintain an office, employees, or agents outside of the United States? If "Y	7				
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If "Yes," complete Schedule G, Part III	19				
			19		x
	20				

Form 990 (2009) UNIVERSITY OF THE NATIONS 99-0240539 Page 4 **Checklist of Required Schedules (continued)** Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations X in the United States on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the X United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated X 23 employees? If "Yes," complete Schedule J 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 lines X 24b through 24d and complete Schedule K If "No," go to line 25 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction X with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a 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 X 25b 990-EZ? If "Yes," complete Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or X 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 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? X 27 If "Yes," complete Schedule L, Part III 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) X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X 28b Schedule L, Part IV 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 direct or indirect owner? If "Yes," complete Schedule L, 28c X 29

29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301 7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part I

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 III, IV, and V, line 1

Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 Schedule R, Part V, line 2

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 organization? If "Yes," complete Schedule R, Part V, line 2

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.

X Form 990 (2009)

X

X

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Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1				
	U S Information Returns Enter -0- if not applicable	1a	479			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and rep	ortabl	е		[
	gaming (gambling) winnings to prize winners?			1c		ļ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	0			ŀ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b		ļ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see					
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ј Бу			l	┰
	this return?			3a	 -	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	4 4	L .	3b	 	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		ty			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial)?	anciai		4a		x
b	If "Yes," enter the name of the foreign country			40	 	-
b	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign I	Rank			`	
	and Financial Accounts	Jank				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	1	x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac	tion?		5b		х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega					
	Prohibited Tax Shelter Transaction?			5c	1	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	е				
	organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or				ļ
	gifts were not tax deductible?			6b		ļ
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	goods				
	and services provided to the payor?			7a	ļ	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	├	X
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	S			ŀ	
	required to file Form 8282?	1	1	7c	ļ	
	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersona	31		i	x
	benefit contract?	10		7e 7f	 	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g	\vdash	 ^
g h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C			' '	 	
	required?	, 45		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting				1	
_	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				İ	
	organization, have excess business holdings at any time during the year?			8	1	
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter		_			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter		1			
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against				1	
	amounts due or received from them)	11b	l <u></u>			
12a		1	1	12a	ļ	ļ
<u> </u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	1		000	1

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body 1b Enter the number of voting members that are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 X supervision of officers, directors or trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? Did the organization become aware during the year of a material diversion of the organization's assets? 5 6 6 Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X The governing body? 8a X 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached X at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O q Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a 10a Does the organization have local chapters, branches, or affiliates? 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 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11 X 11 Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c 13 Does the organization have a written whistleblower policy? 13 14 Does the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a X **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website X Upon request 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public State the name, physical address, and telephone number of the person who possesses the books and records of the organization > UNIVERSITY OF THE NATIONS INC 75-5851 KUAKINI HWY 808-326-7228 HI 96740 KAILUA KONA

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. 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, and 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

(A) Name and Title	(B) Average	Poe	tion /	(l	C) k all t	hat a	anlı A	(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	hours per week	Individual trustee or director		Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
LOREN CUNNINGHAM										
PRESIDENT	50.00	X	_	X				62,638	0	
CHONG HO WON VICE PRESIDENT	50.00	x		x				54,356	0	
LEE GOEHNER										
TRUSTEE	2.00	X	1	<u> </u>	_	<u> </u>		14,947	0	
MARK ANDERSON	E 00							_		
CHAIRMAN JAY VARS	5.00	X	 	├	\vdash	├—		0	0	
SECRETARY/TREASURER	15.00	x		x				o	o	
ALAN LIM		1		 				,	_	
RUSTEE		X					L.	0	0	
DANIEL CHOI TRUSTEE	3.00	x						0	0	
					_	<u> </u>				
	-									

Part VII Section A. Officer	s, Directors, Trus	stees	s, Ke	у Ег	nplo	yees	, an	d Highest Compensated				age C
(A) Name and Title	(B) Average	Posi	tion ((C checl		that a	pply)		(E) Reportable	(F) Estima	ated	
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amour othe compens from i organiz and rel organiza	er sation the ation ated	
	-											
				_								
	<u> </u>					-					_	
	-	<u> </u>										
	 	-									_	
	-	-					_					
1b Total	-							131,941			_	
Total number of individuals (reportable compensation from	-		_	thos	se lis	sted a	abov					
3 Did the organization list any employee on line 1a? If "Yes 4 For any individual listed on line"	s," complete Sche	edule	J fo	suc	h inc	divid	ual	-		3	Yes	No X
the organization and related individual 5 Did any person listed on line	organizations gre	eater	than	\$15	0,00)Ó? II	"Ye	es," complete Schedule J fo	or such	4		x
services rendered to the org	anization? If "Yes									5_		X
Complete this table for your compensation from the organical compensation.	nization_	ensa	ated	ınde	pend	dent	cont				·(C)	
Name a	(A) nd business address						+	Descri	(B) ption of services	c	(C) ompensa	ton
												
		_										
							-					
2 Total number of independen	it contractors (inc	ludin	g bu	t not	lımı	ted t	o the	ose listed above) who rece	ved			·············
more than \$100,000 in com			-							Fon		(2009)

		(2009) ONIVERSITI		MATTONS		99-0240539		Page 9
<u>Pa</u>	rt V	III Statement of Reve	enue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Program Service Revenue Contributions, gifts, grants and other similar amounts	b c d e	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above	1a	7,732,897				
nd o	g	Noncash contributions included in lines 1a-		1,132,631	,	"		
Q B	h	Total. Add lines 1a-1f		▶]	7,732,897			
Revenue	2a b	School Programs Rev	enue	8usn. Code 611600	11,026,183	11,026,183		
m Service	c d e							
ogra	f	All other program service reve	nue					
<u>-</u>	g	Total. Add lines 2a-2f		•	11,026,183			
		Investment income (including other similar amounts)		•	74,897			74,897
	4 5	Income from investment of tax Royalties	-exempt bon	a proceeds			 	···
	6a	Gross Rents (i) Real		(ii) Personal				
		Less rental exps						
	d	Rental inc or (loss) Net rental income or (loss) Gross amount from sales of assets (i) Securities	s	(II) Other			- ,	
	b	other than inventory Less cost or other basis & sales exps	-	4,000 9,800	71			
	С	Gain or (loss)		-5,800				
		Net gain or (loss)		>	-5,800	-5,800		
Other Revenue	8a	Gross income from fundraising ever (not including \$ of contributions reported on line 1c) See Part IV, line 18						
ŧ.	b	Less direct expenses	b					
		Net income or (loss) from fund		ts 🕨				
		Gross income from gaming activities See Part IV, line 19 Less direct expenses	a					
		Net income or (loss) from garr		•				
		Gross sales of inventory, less	mig dolivities				 	
i		returns and allowances	a		`	Į.		
ł	b	Less cost of goods sold	b			-		
1	С	Net income or (loss) from sale						
}	• • •	Miscellaneous Revenue	<u> </u>	Busn. Code				
	11a				_			
	b							
	С	All other revenue		-	······································		.	
I	~							
		Total. Add lines 11a-11d						

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 700 feb 28, 8b, 9a not 100 feb 29 not 101. 1 Claris and chee assistance to governments and angunations in the U.S. See Part IV, line 21 and there assistance to individuals in the U.S. See Part IV, line 21 and the content of the U.S. See Part IV, line 21 and the seeman of Common o		All other organizations must c				
1,456,368 1,456,368 2 368		•	Total expenses	Program service	Management and	
2 Gents and other assistance to individuals in the U.S. See Part IV, Ine. 2 2 3 Gents and other assistance to governments, organizations, and individuals custade the U.S. See Part IV, Ine. 15 and 16 4 Benetis paid to rife members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of current officers, directors, trustees, and key employees 7 Compensation of current officers, directors, trustees, and key employees 8 Compensation of current officers, directors, trustees, and the promote discribed nection 4656(K) (1) and persons discribed necessarial 4656(K) (1) and persons discribed n	1	Grants and other assistance to governments and				······
See Part IV, Ine 22 396,560 3		organizations in the U.S. See Part IV, line 21	1,456,368	1,456,368		
3 Gards and other assistance to governments, organizations, and individuals custade the U.S. See Part IV, lines 15 and 16 U.S. See Part IV, lines 15 u.S. See Part IV, lines 15 u.S. See Part IV, lines 17 U.S. See Part IV, lines 17 U.S. See Part IV, line 17 U.S. See Part IV,	2	Grants and other assistance to individuals in			,	
organizations, and individuals outstate the U.S. See Part IV, lines 15 and 16 a 396,560 396,560 4. Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees of scapasified persons (section 458(c)(1)) and persons described in section 458(c)(1) and persons 458(c)(1) and per		· · · · · · · · · · · · · · · · · · ·				
U.S. See Part IV, Innes 15 and 16 Benefits paid to not rembers Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current of trustees, and key employees Compensation of current of trustees, or local public officials Compensation of current of trustees, or local public officials Compensation of current of trustees, or local public officials Compensation of current of trustees, or local public officials Compensation of current of trustees, or local public officials Compensation of current of trustees, or local public officials Compensation of current of trustees, or local public officials Compensation of current of trustees, or local public officials Compensation of current of trustees, or local public officials Compensation of current of trustees, or local public officials Compensation of current of trustees, or local public officials Compensation of current of trustees, or local public officials Com	3	Grants and other assistance to governments,				
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5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (sectored in section 4580(N)) and persons described in section 4580(N)) and persons described in section 4580(N) and persons described in section 430(N) employer contributions (include section 401(N) and section 403(N) employer contributions (include section 403(N) employer contributions (include section 401(N) and section 403(N) employer (include section 401(N) and se		U.S. See Part IV, lines 15 and 16	396,560	396,560		
Tustees, and key employees	4	· · · · · · · · · · · · · · · · · · ·				
6 Compensation not included above. to disqualified persons (as defined under section 4980((1)) and persons described in section 4980((1)) and persons described in section 4980((1)) and section 40(1) and section 40(1) employee contributions (include section 40(1)) and section 40(1) employee	5	Compensation of current officers, directors,				
persons (as defined under section 4688(f)(1)) and persons described in section 4588(c)(3)(8) 7 Other salaries and wages 8 Person plan contributions (include section 401(x) and section 4010) and section 4010 experience with the se		F				
persons described in section 4958(c)(3)(6) 7 Other salaries and wages 8 Person plan contributions (include section 401(k) and section 40(k) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) 13 Management 14 Legal 32,703 28,347 4,029 32,7 15 Legal 32,703 28,347 4,029 32,7 16 Lobbying 39,167 32,117 7,050 17 Lobbying 39,167 32,117 7,050 18 Lobbying 4 Lobbying 5 Legal 4 Legal 32,703 28,347 1,029 32,7 17 Investment management fees 6 Other 12 Advertising and promotion 131,203 16,454 11,608 3,141 18 Information technology 1,861,005 593,848 1,257,852 9,305 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings Interest 19 Depreciation, depletion, and amortization Insurance 19 Legal 566,476 1,069 565,407 18 Payments to affiliates 2 Depreciation, depletion, and amortization 1 Insurance 19 Legal 57,20 275,977 1,052,743 1,182,234 880,373 301,861 1 226,025 115,260 177,805 2,960 154,334 1,30 154,264 1 17,942,418 11,369,923 6,486,146 86,349 1 30 Joint costs from a combined educational campaign and fundrating solicitation reported in column (8) joint costs from a combined educational campaign and fundrating solicitation in combined educational campaign and fundration reported in column (8) joint costs from a combined educational campaign and fundration solicitation and combined educational campaign and fundration reported in column (8) joint costs from a combined educational campaign and fundration solicitation and combined educational campaign and fundration solicitations and combined educational campaign and	6	•				
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14		- · ·	31,203	16,454	11,608	3,141
15 Royalties 16 Occupancy 1		· • • • • • • • • • • • • • • • • • • •	-			
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17 Travel		· · ·	1 961 005	502 040	1 257 052	0.205
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19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below a Outreach Ministries 25 B Household 1,328,720 275,977 1,052,743 C Schools & Programs 1,182,234 880,373 301,861 C Supplies 296,025 115,260 177,805 2,960 E Cost of Sales & Services 154,394 130 154,264 SI Otal functional expenses. Add lines 1 through 24f 17,942,418 11,369,923 6,486,146 86,349 SOP 98-2 Complete this line only if the organization reported in column (8) joint costs from a combined educational campaign and fundraising solicitation		•				
Interest	19					
21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a Outreach Ministries b Household c Schools & Programs d Supplies Cost of Sales & Services f All other expenses f All other expenses 25 Total functional expenses. Add lines 1 through 24f 26 Joint costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation			566 476	1 069	565 407	
Depreciation, depletion, and amortization 423,789 423,789		F	300,410	1,005	303,407	
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a Outreach Ministries			423.789	-	423 789	
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a Outreach Ministries		· F	1207.00		123,703	
covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a Outreach Ministries		•		· · · · · · · · · · · · · · · · · · ·		
covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a Outreach Ministries	24	Other expenses Itemize expenses not	ŀ			
and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a Outreach Ministries		· · · · · · · · · · · · · · · · · · ·				
5% of total expenses shown on line 25 below and of the strict of total expenses shown on line 25 below and the strict of total expenses shown on line 25 below and the strict of total expenses shown on line 25 below and the strict of total expenses shown on line 25 below and the strict of total expenses shown on line 25 below and the strict of the st		- E				
a Outreach Ministries b Household c Schools & Programs d Supplies e Cost of Sales & Services f All other expenses Total functional expenses. Add lines 1 through 24f 25 Joint costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation 8,434,995 7,184,433 1,250,562 1,328,720 275,977 1,052,743 275,977 1,052,743 275,977 1,052,743 275,977 1,052,743 275,977 1,052,743 275,977 275,9		· •		`		
b Household c Schools & Programs d Supplies 1,328,720 275,977 1,052,743 1,182,234 880,373 301,861 296,025 115,260 177,805 2,960 c Cost of Sales & Services f All other expenses 387,969 55,581 297,847 34,541 25 Total functional expenses. Add lines 1 through 24f 26 Joint costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	а	Outreach Ministries	8,434,995	7,184,433	1,250,562	
c Schools & Programs 1,182,234 880,373 301,861 d Supplies 296,025 115,260 177,805 2,960 e Cost of Sales & Services 154,394 130 154,264 f All other expenses 387,969 55,581 297,847 34,541 25 Total functional expenses. Add lines 1 through 24f 17,942,418 11,369,923 6,486,146 86,349 26 Joint costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation 17,942,418 11,369,923 6,486,146 86,349	b	·				· · · · · · · · · · · · · · · · · · ·
d Supplies 296,025 115,260 177,805 2,960 e Cost of Sales & Services 154,394 130 154,264 f All other expenses 387,969 55,581 297,847 34,541 25 Total functional expenses. Add lines 1 through 24f 17,942,418 11,369,923 6,486,146 86,349 26 Joint costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	С	Schools & Programs				
e Cost of Sales & Services f All other expenses Total functional expenses. Add lines 1 through 24f 25 Total functional expenses. Add lines 1 through 24f 26 Joint costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	d	<u>L</u>				2,960
f All other expenses 25 Total functional expenses. Add lines 1 through 24f 26 Joint costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation 387,969 55,581 297,847 34,541 17,942,418 11,369,923 6,486,146 86,349	е	Cost of Sales & Services $[$	154,394			
Total functional expenses. Add lines 1 through 24f 26 Joint costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation 17,942,418 11,369,923 6,486,146 86,349 11,369,923 6,486,146 86,349	f	All other expenses			297,847	34,541
Joint costs. Check here If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	25	Total functional expenses. Add lines 1 through 24f	17,942,418	11,369,923		86,349
organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	26					
from a combined educational campaign and fundraising solicitation						
fundraising solicitation						
DAA Form 990 (2009)						
	DAA					Form 990 (2009)

Pai		Balance Sheet	0113 99	-0240539		Page 11
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing		1,371,847	_ 1	1,018,780
1	2	Savings and temporary cash investments			2	•
	3	Pledges and grants receivable, net			3	<u> </u>
	4	Accounts receivable, net		84,904	4	230,686
	5	Receivables from current and former officers, directors,	trustees, key			······································
		employees, and highest compensated employees. Com	plete Part II of			
		Schedule L			5	
	6	Receivables from other disqualified persons (as defined	under section	···· - ··· · · · · · · · · · · · · · ·		·······
		4958(f)(1)) and persons described in section 4958(c)(3)(•			
		Part II of Schedule L	,	:	6	
Assets	7	Notes and loans receivable, net	Ì		7	
SS	8	Inventories for sale or use	Ì	4,093	8	3,800
₹	9	Prepaid expenses and deferred charges	Ì	173,873	9	277,467
		Land, buildings, and equipment cost or	1 1	2,3,0,3		211,201
		other basis Complete Part VI of Schedule D	10a 24,542,488			
	b	Less accumulated depreciation	10b 6,199,521	18,726,714	400	18,342,967
- ₁		Investments—publicly traded securities	100 0,133,321	1,563,326		1,492,264
	12	Investments—other securities See Part IV, line 11	}	1,303,320	11	1,432,204
	13	Investments—program-related See Part IV, line 11	•		12	***
	14	Intangible assets	}	· .	13	
		Other assets See Part IV, line 11	}	044 101	14	1 071 441
	16			844,181	15	1,971,441
$\neg \neg$	17	Total assets. Add lines 1 through 15 (must equal line 34	1)	22,768,938	16	23,337,405
		Accounts payable and accrued expenses		636,583	17	259,327
	10 19	Grants payable Deferred revenue	-	<u> </u>	18	1.60, 200
			ŀ	60,065	19	168,388
	20	Tax-exempt bond liabilities			20	
.≝ ।	21	Escrow or custodial account liability Complete Part IV o		···	21	······································
≣ 1	22	Payables to current and former officers, directors, truste			:	
<u>ia</u>		employees, highest compensated employees, and disqu	lalified	045 504	-	
- 1		persons Complete Part II of Schedule L		247,794	22	197,794
	23	Secured mortgages and notes payable to unrelated third	F	6,483,497	23	5,950,292
	24	Unsecured notes and loans payable to unrelated third pa	arties	200,000	24	122,500
	25	Other liabilities Complete Part X of Schedule D	ļ		25	612,346
	26	Total liabilities. Add lines 17 through 25		7,627,939	26	7,310,647
ĕ		Organizations that follow SFAS 117, check here ▶ 🔀	and			
Ĕ		complete lines 27 through 29, and lines 33 and 34.				
हुं द	27	Unrestricted net assets		11,286,069		13,939,910
<u> </u>	28	Temporarily restricted net assets		2,444,953	28	676,871
≧ 2	29	Permanently restricted net assets	· l	1,409,977	29	1,409,977
교		Organizations that do not follow SFAS 117, check he	re ▶ 📗			, , , , , , , , , , , , , , , , , , , ,
5		and complete lines 30 through 34.				
छ ।	30	Capital stock or trust principal, or current funds			30	
Se	31	Paid-in or capital surplus, or land, building, or equipmen	t fund		31	
AS 3	32	Retained earnings, endowment, accumulated income, o	r other funds		32	
Net Assets or Fund Balances	33	Total net assets or fund balances	İ	15,140,999		16,026,758
Z 3	34	Total liabilities and net assets/fund balances	ľ	22,768,938		23,337,405

Form **990** (2009)

orm	990 (2009) UNIVERSITY OF THE NATIONS	99-0240539		Pa	ge 12
Pa	rt XI Financial Statements and Reporting				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X	Accrual Other			
	If the organization changed its method of accounting from a prior year or	checked "Other," explain in			
	Schedule O	·			
2a	Were the organization's financial statements compiled or reviewed by an	independent accountant?	2a	,	\mathbf{x}_{\perp}
b	Were the organization's financial statements audited by an independent a	accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that ass	umes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection	of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process	ess during the tax year, explain in			
	Schedule O				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the finance	ial statements for the year were	İ	ļ	
	issued on a consolidated basis, separate basis, or both			Ŧ.	
	X Separate basis Consolidated basis Both consolidated a	nd separate basis			
3a	As a result of a federal award, was the organization required to undergo	an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?		3a	L	X
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 ste	os taken to undergo such audits	3b	l .	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public Inspection

itern	al Re	venue Service				- Jepai			J.		th	pect	ION
		he organizatior	UNIVERSITY O	F THE NATIONS					99-	024	ntification ni 05 <u>3</u> 9	ımbei	
Pa	rt I	Reaso	on for Public Charity	Status (All organizations	must c	omplet	e this	part.) S	See in	struct	ions		
he (orgar	nization is not	a private foundation becaus	e it is (For lines 1 through 11, c	heck only	one box	 _						
1		A church, con	vention of churches, or ass	ociation of churches described i	n section	170(b)(1)(A)(i).						
2	X	A school desc	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E)									
3				ce organization described in sec	tion 170(b)(1)(A)(i	ii).						
4	Ħ			in conjunction with a hospital of				(1)(A)(i)	u). Ente	r the ho	soital's nam	e	
·	را	city, and state	-						.,			,	
5	\Box	•		of a college or university owned	or operate	ad by a gr	wernme	ntal uni	doccul	hed in			
5	لــا	_	o)(1)(A)(iv). (Complete Part	· · · · · · · · · · · · · · · · · · ·	or operate	o by a go	overiline.	illai uiii	i desciii	Jeu III			
_	\Box			•	aatian 47	0/6\/4\/6	·/···						
6	\vdash			overnmental unit described in so			• •			l le l			
7	لــا	=		substantial part of its support fro	om a gove	rnmentai	unit or i	rom the	genera	i public			
_			section 170(b)(1)(A)(vi). (Co	·									
8	\vdash			70(b)(1)(A)(vi). (Complete Part	•								
9	Ш) more than 33 1/3 % of its sup					-	-	oss		
				pt functions—subject to certain	•	-	-						
		support from	gross investment income ar	nd unrelated business taxable in	come (les	ss section	511 tax	() from b	usiness	ses			
		acquired by the	ne organization after June 3	0, 1975 See section 509(a)(2).	(Complet	te Part III)						
10		An organizati	on organized and operated o	exclusively to test for public safe	ety See s	ection 50	9(a)(4).						
11		An organizati	on organized and operated of	exclusively for the benefit of, to	perform th	ne functio	ns of, o	to carry	out the)			
		purposes of c	ne or more publicly support	ed organizations described in se	ection 509	9(a)(1) or	section	509(a)(2	2) See:	section)		
		509(a)(3). Ch	eck the box that describes t	he type of supporting organizati	on and co	mplete lii	nes 11e	through	11h				
		a Type	I b Type II	c Type III-Functions	ally integra	ated	d	Тур	e III-Ot	her			
е		By checking t	his box, I certify that the org	anization is not controlled direct	tly or indir	ectly by c	ne or m	ore disc	ualified				
		persons other	r than foundation managers	and other than one or more put	olicly supp	orted org	anızatıo	ns desc	ribed in	section	1		
		509(a)(1) or s	section 509(a)(2)										
f		If the organization	ation received a written dete	rmination from the IRS that it is	a Type I,	Type II, o	or Type	III suppo	orting				
		organization,	check this box										
9		Since August	17, 2006, has the organiza	tion accepted any gift or contrib	ution from	any of th	ne .						_
_		following per	sons?			•							
		(i) A persor	who directly or indirectly co	ontrols, either alone or together	with perso	ons descr	ibed in (n)				Ye	s No
			•	f the supported organization?				•			11g(n	
			member of a person describ								11g(-
		•	•	described in (i) or (ii) above?							11g(
h			• •	he supported organization(s)							رقت ا	,	
···	Nami	e of supported	(II) EIN	(iii) Type of organization	(iv) is the c	organization	(v) Did v	ou notify	(vi)	s the	(VII) A	mount	of
١٠,		anization	(1)/ =	(described on lines 1–9	1 ' '	sted in your		nization in	organizat	ion in col		pport	VI.
				above or IRC section	governing	document?		of your port?		zed in the S ?			
				(see instructions))	Yes	No	Yes	No	Yes	No			
					165		162	I NO	162	140			
						}							
		·			1	 				ļ			
					1]	1]	1	l i			
		<u> </u>										-	,
					-				<u> </u>	<u> </u>			
				l		1	L		1				

Sche	edule A (Form 990 or 990-EZ) 2009 UN	VERSITY	OF THE NA	TIONS	99	-0240539	Page 2
	irt II Support Schedule for O	rganizations l	Described in S	ections 170(b)(1)(A)(iv) and	170(b)(1)(A)(v	i)
	(Complete only if you che	ecked the box	on line 5, 7, o	r 8 of Part I.)			·
	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						<u> </u>
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10		<u> </u>				
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for the		t, second, third, fo	urth, or fifth tax ye	ar as a section 50°	1(c)(3)	
	organization, check this box and stop her		 				•
	tion C. Computation of Public Si		 			- · · ,	
14	Public support percentage for 2009 (line 6		=	nn (f))		14	<u></u> %
15	Public support percentage from 2008 Sch					15	%
16a	33 1/3 % support test—2009. If the organ				33 1/3 % or more,	check this box	. –
	and stop here. The organization qualifies						▶ _
b	33 1/3 % support test—2008. If the organ				15 is 33 1/3 % or r	nore, check this	. —
17-	box and stop here. The organization qual						▶ _
17a							
	more, and if the organization meets the "fr						
ь	organization meets the "facts-and-circums						▶ [_
D	10%-facts-and-circumstances test—200						
	more, and if the organization meets the "fa organization meets the "facts-and-circums						
18	Private foundation. If the organization did						
_		THE CHECK & DUX		, 178, UL 170, CN	uns sox and se	se monuchons	

99-0240539 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) **Section B. Total Support** Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 Public support percentage from 2008 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 33 1/3 % support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 19a 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3 % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

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

Page 4

Schedule A (Form 990 or 990-EZ) 2009 UNIVERSITY OF THE NATIONS 99-0240539

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Inspection

2009 Open to Public

Employer identification number Name of the organization UNIVERSITY OF THE NATIONS 99-0240539 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete of the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _ _ _ _ _ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes No 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

		OF THE NA			99-02405			<u> </u>	<u>'age 2</u>
Pa	rt III Organizations Maintaining (s (contin	ued))
3	Using the organization's acquisition, accession collection items (check all that apply)	, and other records, c	heck any of the follow	ring that are	e a significant us	e of its	<u>-</u>		
а	Public exhibition	d 🗌 Loa	n or exchange progra	ıms					
b	Scholarly research	e 🗍 Oth							
С	Preservation for future generations	· 🗀 🗣							
4	Provide a description of the organization's colle	ctions and explain ho	w they further the org	anızatıon's	exempt purpose	: in			
5	During the year, did the organization solicit or re	eceive donations of a	t, historical treasures	, or other s	ımılar		<u> </u>	_	7
D-	assets to be sold to raise funds rather than to b						Y6		No
Pa	rt IV Escrow and Custodial Arran	igements. Comp	lete if the organiz	zation ar	iswered "Yes	to Form	i 990, Pa	rt	
	IV, line 9, or reported an amo								
1a	Is the organization an agent, trustee, custodian	or other intermediary	for contributions or o	ther assets	s not		_	_	_
	included on Form 990, Part X?						Y€	:s	No
b	If "Yes," explain the arrangement in Part XIV ar	nd complete the follow	ring table						
							Amoun	t	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Forr	m 990, Part X, line 21	?				Ye		No
	If "Yes," explain the arrangement in Part XIV							<u> </u>	
	rt V Endowment Funds. Comple	te if organization	answered "Yes"	to Form	990. Part IV	line 10.			
		(a) Current year	(b) Pnor year	~		hree years ba	ck (e) Fou	vears	back
1a	Beginning of year balance					"" - 1			····
	Contributions			·		·····		~~~~	·
	Net investment earnings, gains,			 		************			******
_	and losses								
d	Grants or scholarships							**********	******
	Other expenditures for facilities		-			······································	_	····	
·	and programs			į.			1		
f	Administrative expenses	· · · · · ·		 					
g	End of year balance								
2	•	ad balansa bald as			<u></u>		1		
٠,	Provide the estimated percentage of the year e Board designated or quasi-endowment ▶								
a h		%							
^	Permanent endowment ► % Term endowment ► %								
_	· · ·				5				
Ja	Are there endowment funds not in the possessi	ion of the organization	i that are nelo and ad	ministerea	for the		1		т
	organization by						(a. 4)	Yes	No
	(i) unrelated organizations						3a(ı)	—	<u> </u>
	(ii) related organizations						3a(ii)		<u> </u>
	If "Yes" to 3a(ii), are the related organizations li						_3b		<u> </u>
- 4	Describe in Part XIV the intended uses of the o			00 0	V !! 40				
Fè	art VI Investments—Land, Buildin								
	Description of investment	(a) Cost or other bas			(c) Accumula		(d) Book	value	
		(investment)	basis (other		depreciatio	n			
	Land			3,064			6,7		
	Buildings		15,45	6,967	4,169	,725	11,2	<u> 37,</u>	<u> 242</u>
	Leasehold improvements								
	Equipment			6,342	1,720				<u>617</u>
	Other			1,115	309	,071			044
Tota	I. Add lines 1a through 1e (Column (d) must equ	ual Form 990, Part X,	column (B), line 10(c)))	· · · · · · ·	<u> </u>	18,3	<u>12,</u>	967
						Cabaa			

Schedule D (Form 990) 2009 UNIVERSITY OF THE NA Part VII Investments—Other Securities. See Form 9	000 Ded V 15- 40	99-0240539	Page 3
		<u> </u>	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v Cost or end-of-year	
Financial derivatives	<u></u>	Cost of end-or-year	
Closely-held equity interests	 	-	
Other		-	
····		-	
	-		<u> </u>
	-		
	-		
	- -		
	-		
	_		
	_		
			
<u> </u>	<u> </u>		
Part VIII Investments—Program Related. See Form 9	990, Part X, line 13.		
(a) Description of investment type	(b) Book value	(c) Method of v Cost or end-of-year	
			<u> </u>
			
			
		-	
· · · · · · · · · · · · · · · · · · ·			
		· · · · · · · · · · · · · · · · · · ·	
			
			
Total (Caluma (h) must asual Farm 000 Part V and (P) has 40			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, line 15		L	
).		(I) B I I
(a) Description			(b) Book value
Construction in Progre Note Receivable	ess		1,066,777
Note Receivable			904,664
·····			
			
			··.
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)		•	1,971,441
Part X Other Liabilities. See Form 990, Part X, line	25.		
1 (a) Description of liability	(b) Amount		- T
Federal income taxes			
Other Liabilities	612,346		
	-		
	<u> </u>		
		1	
		1	
		4	
	 -	4	
	<u> </u>	4	
	1	l .	
		7	•
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 612,346		·

organization's liability for uncertain tax positions under FIN 48

	dule D (Form 990) 2009 UNIVERSITY OF THE NATIONS		99-024053		Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	<u>Audi</u>	ted Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	18,828,177
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	17,942,418
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	885,759
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			_5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	3
9	Total adjustments (net) Add lines 4 through 8			9	-3
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			10	885,756
Pa	rt XII Reconciliation of Revenue per Audited Financial Statemen	nts V	Vith Revenue per Re	turn	· ·
1	Total revenue, gains, and other support per audited financial statements			1	18,828,177
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
þ	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	_2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	_		3	18,828,177
4	Amounts 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			
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	18,828,177
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents '	With Expenses per F	Returi	n
1	Total expenses and losses per audited financial statements			1	17,942,421
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b		}	
С	Other losses	2c			
d	Other (Describe in Part XIV)	2d	3		
е	Add lines 2a through 2d			2e	3
3	Subtract line 2e from line 1			3	17,942,418
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	17,942,418
Pa	rt XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines				
and :	2 b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, line	es 2d	and 4b Also complete		
-	art to provide any additional information				
_P	art XI, Line 8 - Reconciliation of Changes	_ 9	ther		
B	ook / Tax Depreciation Difference		Ġ	2	-3
	Son 1 140 Poblecianion Pilipience		- 	<u> </u>	 -
			- -		
P	art XIII, Line 2d - Expense Amounts Include	d i	n Financiale	- 0	ther
		<u>~</u> ±			
_B	ook / Tax Depreciation Difference		_ \$	S	3
					_ _

Schedule D (Fo	orm 990) 200	9 UNIV	ERSITY	OF THE	NATIONS	99	-0240539	Page 5
Part XIV	Supplem	ental Infor	rmation (co	ontinued)				
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SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

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

UNIVERSITY OF THE NATIONS

Employer identification number 99-0240539

			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	х	
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	х	<i>"</i>
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 If you need more space, use Schedule O (Form 990) It is explicit in the name of the University "University of the Nations", that this organization is open to all students worldwide, regardless of race! Enrollment records will show that students have come from all over the world from all races.	3	x	
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	x	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	х	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
	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			
а	Students' rights or privileges?	5a		X
b	Admissions policies?	5b		<u>x</u>
С	Employment of faculty or administrative staff?	5c		X
d	Scholarships or other financial assistance?	5d		х
е	Educational policies?	5e		X
f	Use of facilities?	5f		X
g	Athletic programs?	5g		х
h	Other extracurricular activities?	5h		x
	If you answered "Yes" to any of the above, please explain. If you need more space, use Schedule O (Form 990)		`	
c -	Door the organization receive any financial aid as countries from a countries of			v
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	 	X
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990)	6b	<u> </u>	 ^
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form 990)	7	x	

Schedule F (Form 990)

Statement of Activities Outside the United States

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

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service Open to Public Inspection ► Attach to Form 990. ► See separate instructions. Name of the organization Employer identification number UNIVERSITY OF THE NATIONS 99-0240539 General Information on Activities Outside the United States. Complete if the organization answered Part I "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award Yes No the grants or assistance? 2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the **United States** 3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total offices in the employees or a program service, expenditures for region (by type) (i e, region agents in fundraising, program services, describe specific type of region region grants to recipients located in service(s) in region the region)

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2009

Part II

Schedule F (Form 990) 2009 UNIVERSITY OF THE NATIONS

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, 99-0240539

Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000

Page 2

Use Schedule F-1 (Form 990) if additional space is needed.

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, vappraisal, other)
		East Asia	Donation	15,700	Check			
		East Asia	Donation	53,587	Check			
			Donation	15,413	Check			
		Pacific						
			Donation	42,729	Check			
		South Asi	ď					
			Donation	18,245	Check			
		Sub-Saharan Africa	an Africa					
			Donation	000'1	Check			
		Pacific						
			Donation	14,058	Check			
		Caribbean						
			Donation	17,062	Check			
		Pacific						
			Donation	9,135	Check			
		Sub-Saharan Africa	an Africa					
			Donation	44,030	Check			
		East Asia						
			Donation	5,128	Check			
		Pacific						
		East Asia	Donation	89,392	Check			
			Donation	27,808	Check			
		Europe						
			Donation	12,921	Check	:		1
		North America	rica					
			Donation	24,352	Check			
		Sub-Saharan Africa	an Africa					

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ~

Enter total number of other organizations or entities

က

Schedule F (Form 990) 2009

16

2015 05/11/2011 4 18 PM

Schedule F (Form 990) 2009 UNIVERSITY OF THE NATIONS

99-0240539

Schedule F (Form 990) 2009 appraisal, other), Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. (h) Method of valuation (book, FMV, (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of recipients (b) Region (a) Type of grant or assistance Part III

Part IV Supplemental Information

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

Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds
University of the Nations has only donated money to those organizations
that have had accountability with us. Most if not all of the organizations
leaders and/or founders have been trained in our facilities at some time.
We review the exempt purposes of the organizations to see if they comply
with the University's Biblical/Christian standards, similar mission and
purpose, and code of ethics. Donations to these other non-profit
organizations are not considered grants, but donations.

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SCHEDULEI

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Part i

General Information on Grants and Assistance UNIVERSITY OF THE NATIONS

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

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

► Attach to Form 990.

OMB No 1545-0047 2009

Open to Public Inspection

Employer identification number 99-0240539

 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? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 	the amount of the gance?	rants or ass grant funds	istance, the grantees' in the United States	eligibility for the grants	or assistance, an	ъ	X Yes	Š,
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	overnments an recipient that re	d Organizations ceived more the pace is needed	Organizations in the United States. Complete if the organization answered "Yes" to eived more than \$5,000 Check this box if no one recipient received more than \$5,00 ace is needed	ited States. Com Check this box if	plete if the org no one recipie	anization ansi nt received m	wered "Yes" to bre than \$5,000. Use	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant (e) Amount of non-cash assistance		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	[
Ahualani 75-5851 Kuakini Hwy #41							Donation	
Kailua Kona HI 96740	99-0207234	3	189,671					
Water of Life Institute 75-5851 Kuakini Hwy #75 Kailua Kona	56-2648453	က	19,500				Donation	
iaha kini Hwy #102		,	· •				Donation	
Kailua Kona Hi 96/40	80-0149114	r)	1,242,197				2	
2 Enter total number of section 501(c)(3) and government organizations	organizations						m A	

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. 99-0240539 Schedule I (Form 990) 2009 UNIVERSITY OF THE NATIONS Part III Grants and Other Assistance to Individuals in the

Page 2

	Use Part IV and Schedule I-1 (Form 990) it additional space is needed.	(Form 990) if addition	nai space is needed.			
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
						•
						•
i i				***		
!						
Part IV	Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	omplete this part to p	provide the information	on required in Part I,	ine 2, and any other additi	onal information.

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

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

Attach to Form 990 or Form 990-EZ. See separate instructions. OMB No 1545-0047

Open To Public Inspection

Name of the organization

UNIVERSITY OF	THE NA	TIC	NS			99-					<i>,</i>	
Part I Excess Benefit Transactions ((c)(4) orga	nizations only		<u> </u>	.00				
Complete if the organization answered "							ne 40	b				
(a) Name of discussified some		*			(h) D					(c) (Correct	ed?
1 (a) Name of disqualified person					(b) Description of	or transaction				Yes	. 1	ło
		_										
											\bot	
											_	
						 -			_	l	L_	
2 Enter the amount of tax imposed on the organizat under section 4958	ion manage	rs or d	lisqualified pers	ons during	the year		▶ \$					
3 Enter the amount of tax, if any, on line 2, above, r	eimbursed t	ov the	organization									
Part II Loans to and/or From Interest			- gamzation			-	· •					
Complete if the organization answered			D. Part IV line 2	6 or Form	990-FZ, Part	V line 38a						
			_				(a) la s	info140	(6) 40	220124	(~\\A	/r.tton
(a) Name of interested person and purpose	1 ' '	oan to om the	(c) Origii principal ar		(d) Balan	ce que	(e) in c	ierauit,		ard or	(g) W agree	
	organ	zation?							comn	nittee?		
	То	From					Yes	No	Yes	No	Yes	No
Loren Cunningham			-									
Cash Flow	X		50	0,000	1:	97,794		X	X		X	
					;							
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Total			·-·	▶ \$	1	97,794		ــــــــــــــــــــــــــــــــــــــ	-	<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Part III Grants or Assistance Benefitt	ing Inter	estec	Persons.	-					<u> </u>			
Complete if the organization answered	"Yes" on Fo	rm 99	0, Part IV, line	27								
(a) Name of interested person			(b) Relatio	nship betwee	en interested per	son and the	(c) A	moun	t and	type of	assist	ance
				orga	anization							
												
							<u> </u>					
			· · · · · ·				 					
			<u> </u>				<u> </u>					
							\vdash					
Part IV Business Transactions Involv	ing Inter	este	d Persons.	<u>_</u>			L				_	_
Complete if the organization answered	_			28a, 28b, c	or 28c							
(a) Name of interested person	Ti		nship between		mount of	(d) Descr	notion	of tran	sactio	n		Shanng
1.7.			person and the		saction	(=, ====	.,					org nues?
		orga	anization	<u> </u>							Yes	No
				<u> </u>							<u> </u>	<u> </u>
				ļ <u> </u>							↓	ــــ
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SCHEDULE O

(Form 990)

•

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

• Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

UNIVERSITY OF THE NATIONS

Employer identification number

99-0240539

Form 990, Part VI, Line 3 - Management Delegated Management of organization is contracted out.

Form 990, Part VI, Line 11a - Organization's Process to Review Form 990 The board reviews the Form 990 and Schedules before it is finalized and filed with the IRS.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governing documents are available to the public upon request to main office during normal business hours.

Schedule O - Additional Information

Form 990, Part III, Line 4a

This organization does not give grants to any individual or organization only donations.

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

Attachment Sequence No

► See separate instructions.

► Attach to your tax return.

Name	s) snown on return UNIVER	SITY OF THE	NATIONS					ying n 024	umber 0539
Busine	ess or activity to which this form relates							-	
Ir	direct Depreciat								
Pa		•	erty Under Section						
	Note: If you have	any listed proper	<u>ty, complete Part V I</u>	<u>before you</u>	ı com	plete Pa	art I.		
1	Maximum amount. See the instru	ctions for a higher lim	it for certain businesses					1	250,000
2	Total cost of section 179 property	placed in service (se	e instructions)					2	
3	Threshold cost of section 179 pro	perty before reduction	n in limitation (see instruct	ions)				3	800,000
4	Reduction in limitation Subtract I		•					4	<u> </u>
5	Dollar limitation for tax year Subtract li							5	
6	(a) Description	on of property	(b) Cos	t (business use	only)	(c) E	lected cost		
7	Listed property Enter the amount				7			ı	
8	Total elected cost of section 179	• • •	• •	d 7				8	
9	Tentative deduction Enter the sn							9_	
10	Carryover of disallowed deduction	•			_			10	<u></u>
11	Business income limitation Enter		•	•	5 (see i	instruction	s)	11	
12	Section 179 expense deduction			ine 11	<u> </u>			12	
13 Note	Carryover of disallowed deduction Do not use Part II or Part III below				13				<u>L</u>
				on (Do no	4 incl	udo liet	od prop	orty)	(Soo instr.)
			nd Other Depreciati			ude list	s a prop	City)	(366 11811.)
14	Special depreciation allowance for		ither than listed property) (piaceo in ser	vice			44	
15	during the tax year (see instruction Property subject to section 168(f)	•						15	
16	Other depreciation (including ACI	, ,						16	423,792
********	market and the second s		ude listed property.)	(See instr	uction	<u> </u>		1 10	423,192
	III IIIAONO Depiecia	tion too not men	Section A	(OCC IIISII	uctioi	13.)			
17	MACRS deductions for assets pla	aced in service in tax		nο				17	
18	If you are electing to group any assets		·		ccounte	chack har			
			rvice During 2009 Tax Ye					vstem	· · · · · · · · · · · · · · · · · · ·
		(b) Month and year	(c) Basis for depreciation	(d) Recovery				,	
	(a) Classification of property	placed in service	(business/investment use only-see instructions)	penod	(e) C	onvention	(f) Mei	hod	(g) Depreciation deduction
<u>19a</u>	3-year property	_}							
<u>b</u>	5-year property			ļ	<u> </u>				
_с	7-year property	_}							
<u>d</u>	10-year property	_}							<u> </u>
е	15-year property			<u> </u>					
f	20-year property	_[
9_	25-year property			25 yrs			S/L	•	
h	Residential rental			27 5 yrs		MM	S/l	-	
	property	<u> </u>		27 5 yrs		MM	S/l	-	<u> </u>
i	Nonresidential real			39 yrs	<u> </u>	MM	S/I	_	
	property	<u> </u>		<u> </u>		MM	S/I		
		Assets Placed in Serv	vice During 2009 Tax Yea	r Using the	Alterna	tive Depr	eciation	Syster	n
<u>20a</u>		4					S/I		
	12-year			12 yrs	<u> </u>		S/I		<u> </u>
******	40-year		L	40 yrs	<u> </u>	MM	S/I	<u> </u>	<u>L</u>
	urt IV Summary (See in		-		_				· · · · · · · · · · · · · · · · · · ·
21	Listed property Enter amount fro							21	<u> </u>
22	Total. Add amounts from line 12	-				ter here			
	and on the appropriate lines of ye		•		s			22	423,792
23	For assets shown above and pla	-	the current year, enter the						
	portion of the basis attributable to	o section 263A costs			23				- 4FC2 :

Form 8868 (R						Page 2
	filing for an Additional (Not Automatic) 3-Month Ext					► X
	mplete Part II if you have already been granted an au			8868		
	filing for an Automatic 3-Month Extension, complet					
Part II 38	Additional (Not Automatic) 3-Month E	<u>xtension (</u>	of Time. Only file the original (r	o copie	s needed)	
Type or print	Name of exempt organization			Employ	er identification	number
File by the	UNIVERSITY OF THE NATION	Q		00-0	240539	
extended	Number, street, and room or suite no If a P.O box		Ho-o	33-0	240333	
due date for	C/O W E CORNELL JR 1101					
filing your return See	City, town or post office, state, and ZIP code. For a			-		
instructions	1	A 95404				
Enter the Retu	um code for the return that this application is for (file a	separate ap	plication for each return)			01
Application		Return	Application			Return
Is For		Code	Is For			Code
Form 990		01				
Form 990-B	L	02	Form 1041-A			08
Form 990-E	Z	03	Form 4720	- ***		09
Form 990-P	F	04	Form 5227			10
Form 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069			11
	(trust other than above)	06	Form 8870			12
STOPI Do no	t complete Part II if you were not already granted a	an automatic	3-month extension on a previously fil	ed Form 8	8868.	
4 I reques 5 For cale	group, check this box If it is for pa armes and EINs of all members the extension is for. st an additional 3-month extension of time until 0.5 endar year , or other tax year beginning x year entered in line 5 is for less than 12 months, che	5/15/11 07/		attach a		
□ c	change in accounting period					
	detail why you need the extension					
Addi	ttional time is requested	to gat	her information to p	repar	e a comp	olete
and	accurate return.					
On If the a	polication in far Form 000 PL 000 PE 000 T (200	- 0000	. H - 1 - 1 - 0 - 1 - 1		1	
	pplication is for Form 990-BL, 990-PF, 990-T, 4720, o indable credits See instructions	or 6069, enter	the tentative tax, less any		1.	
	pplication is for Form 990-PF, 990-T, 4720, or 6069, e	nlos o miner	and the sead to sead	8a	\$	
		-		13.6		
	ed tax payments made Include any pnor year overpa paid previously with Form 8868	lyment allowe	o as a credit and any			
	e Due. Subtract line 8b from line 8a Include your pay	mont with the	o form or if required deposit with	8b	<u> </u>	
	upon or, if required, by using EFTPS (Electronic Fede				s	
			nd Verification	8c	1 3	
Under penalties true, correct, and	of perjury, I declare that I have examined this form, including a d complete, and that I am authonzed to prepare this form	_		y knowledge	and belief, it is	
Signature >	Mrs. E. Cornell Je	_	Title DA			11 /10 /11
Signature F	man p. where ye		iue F C / U			01/10/11
	·				Form 886	68 (Rev 1-2011)