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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 06-01-2010 and ending 05-31-2011

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization

Rollins College

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

1000 Holt Avenue - CB 2715

Room/suite

City or town, state or country, and ZIP + 4

Winter Park, FL 32789

F Name and address of principal officer

H(a) Is this a group return for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☒ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ☐ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website:

www.rollins.edu

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation

1885

M State of legal domicile

FL

Part I	Summary																											
Activities & Governance	1 Briefly describe the organization's mission or most significant activities Education and public service mission Rollins College educates students for global citizenship and responsible leadership, empowering graduates to pursue meaningful lives and productive careers We are committed to liberal arts ethos and guided by its values and ideals Our guiding principles are excellence, innovation and community We provide opportunities for students and the community to explore diverse intellectual, spiritual and aesthetic traditions We are dedicated to scholarship, academic achievement, creative accomplishment, cultural enrichment, social responsibility and environmental stewardship																											
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets																											
	<table><tr><td> 3 Number of voting members of the governing body (Part VI, line 1a) </td><td> 3 </td><td> 31 </td></tr><tr><td> 4 Number of independent voting members of the governing body (Part VI, line 1b) </td><td> 4 </td><td> 30 </td></tr><tr><td> 5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) </td><td> 5 </td><td> 2,219 </td></tr><tr><td> 6 Total number of volunteers (estimate if necessary) </td><td> 6 </td><td> 700 </td></tr><tr><td> 7a Total unrelated business revenue from Part VIII, column (C), line 12 </td><td> 7a </td><td> 69,549 </td></tr><tr><td> 7b Net unrelated business taxable income from Form 990-T, line 34 </td><td> 7b </td><td></td></tr></table>	3 Number of voting members of the governing body (Part VI, line 1a)	3	31	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	30	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	2,219	6 Total number of volunteers (estimate if necessary)	6	700	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	69,549	7b Net unrelated business taxable income from Form 990-T, line 34	7b										
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Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

Jeffrey G Eisenbarth Vice President

2012-04-17

Date

Print/Type preparer's name

Firm's name

Firm's address

Preparer's signature

Date

Check if self-employed

PTIN

Firm's EIN

Phone no

May the IRS discuss this return with the preparer shown above? (see instructions)

☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2010)

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III ☐ Yes ☒ No

1

Briefly describe the organization's mission

Education and public service mission Rollins College educates students for global citizenship and responsible leadership, empowering graduates to pursue meaningful lives and productive careers We are committed to liberal arts ethos and guided by its values and ideals Our guiding principles are excellence, innovation and community We provide opportunities for students and the community to explore diverse intellectual, spiritual and aesthetic traditions We are dedicated to scholarship, academic achievement, creative accomplishment, cultural enrichment, social responsibility and environmental stewardship

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 98,231,066 including grants of \$ 30,617,135) (Revenue \$ 91,718,744)

Rollins College provided liberal arts and graduate educational courses to 3,226 students who took a combined 97,412 credit hours of classes, a total of 610 undergraduate and 314 graduate degrees were awarded, and a variety of other educational and cultural programs were offered to the community during the fiscal year ended May 31, 2011

4b

(Code) (Expenses \$ 20,961,474 including grants of \$) (Revenue \$ 15,980,638)

Rollins College operated various auxiliary enterprises including dining, housing and bookstore services for the convenience and well-being of its students, faculty and staff

4c

(Code) (Expenses \$ including grants of \$) (Revenue \$)

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses \$ 119,192,540

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i> 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 	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? <i>If "Yes," complete Schedule C, Part I.</i>	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>	4	No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i>	5	No
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? <i>If "Yes," complete Schedule D, Part I.</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? <i>If "Yes," complete Schedule D, Part III.</i> 	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? <i>If "Yes," complete Schedule D, Part IV.</i> 	9	No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i> 	10	Yes
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> 	11a	Yes
b	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? <i>If "Yes," complete Schedule D, Part VII.</i> 	11b	No
c	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? <i>If "Yes," complete Schedule D, Part VIII.</i> 	11c	No
d	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? <i>If "Yes," complete Schedule D, Part IX.</i> 	11d	No
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> 	11e	Yes
f	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 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i> 	11f	Yes
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i> 	12a	No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i> 	12b	Yes
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i> 	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? <i>If "Yes," complete Schedule F, Parts I and IV.</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 ? <i>If "Yes," complete Schedule F, Parts II and IV.</i> 	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If "Yes," complete Schedule F, Parts III and IV.</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? <i>If "Yes," complete Schedule G, Part I (see instructions).</i> 	17	Yes
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i> 	18	Yes
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i> 	19	No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

Part 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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	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? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>			☐ Yes ☒ No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V							
				Yes	No		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.			1a	4,685		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.			1b	0		
c. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?				1c	Yes		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return.			2a	2,219		
b. If at least one is reported on line 2a, did the organization file all required federal employment tax returns?				2b	Yes		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).							
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	Yes		
b. If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.				3b	Yes		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	Yes		
b. If "Yes," enter the name of the foreign country: AS See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a			No
b. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				5b			No
c. If "Yes" to line 5a or 5b, did the organization file Form 8886-T?				5c			No
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?			6a	Yes		
b. If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?				6b	Yes		
7. Organizations that may receive deductible contributions under section 170(c).							
a. Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?				7a	Yes		
b. If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b	Yes		
c. Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?				7c			No
d. If "Yes," indicate the number of Forms 8282 filed during the year.				7d	0		
e. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				7e			No
f. Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				7f			No
g. If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?				7g			No
h. If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				7h			No
8. Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?				8			No
9. Sponsoring organizations maintaining donor advised funds.							
a. Did the organization make any taxable distributions under section 4966?				9a			No
b. Did the organization make a distribution to a donor, donor advisor, or related person?				9b			No
10. Section 501(c)(7) organizations. Enter							
a. Initiation fees and capital contributions included on Part VIII, line 12.				10a			
b. Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.				10b			
11. Section 501(c)(12) organizations. Enter							
a. Gross income from members or shareholders.				11a			
b. Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).				11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			12a			No
b. If "Yes," enter the amount of tax-exempt interest received or accrued during the year.				12b			
13. Section 501(c)(29) qualified nonprofit health insurance issuers.							
a. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.				13a			No
b. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.				13b			
c. Enter the amount of reserves on hand.				13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a			No
b. If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.				14b			No

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	31		
b	Enter the number of voting members included in line 1a, above, who are independent	30		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant 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			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
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	Yes	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	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?			
a	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 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		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		No

Section C. Disclosure	
17	List the States with which a copy of this Form 990 is required to be filedFL
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. ☐ Own website ☒ Another's website ☒ Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. William Short 1000 Holt Avenue - CB 2715 Winter Park, FL 327894499 (407) 646-2125

Check if Schedule O contains a response to any question in this Part VII ☐ ☒

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

Form **990** (2010)

Part VII

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization: 74

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization		
(A) Name and business address	(B) Description of services	(C) Compensation
SunGard Higher Education 14083 Collections Ctr Dr Chicago, IL 60693	Consulting, SW maint	357,420
Sanderson Asset Management Inc 250 S Wacker Dr Ste 220 Chicago, IL 60606	Investment mgmt fees	187,663
Royall & Company 1920 East Parham Rd Richmond, VA 232282206	New student search	251,629
Hammond Associates 101 S Hanley Suite 300 St Louis, MO 631053406	Investment consult'g	282,245
Einhorn Yaffee Prescott The Argus Bldg 412 Broadway Albany, NY 12207	Architect & Engineer	177,836
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶21		

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns 1a						
	b Membership dues 1b			64,103			
	c Fundraising events 1c			153,607			
	d Related organizations 1d						
	e Government grants (contributions) 1e			1,106,633			
	f All other contributions, gifts, grants, and similar amounts not included above 1f			18,331,062			
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f			19,655,405			
	Program Service Revenue				Business Code		
2a Student tuition			90,489,497	90,489,497			
b Philanthropy/oth programs			464,905	464,905			
c Museum/other admissions			126,868	126,868			
d Auxiliary income			15,980,638	15,980,638			
e Athletic programs			481,659	481,659			
f All other program service revenue			155,815	155,815			
g Total. Add lines 2a-2f			107,699,382				
Other Revenue		3 Investment income (including dividends, interest and other similar amounts)					
				5,114,132			5,114,132
	4 Income from investment of tax-exempt bond proceeds			0			
	5 Royalties			279,325			279,325
			(i) Real	(ii) Personal			
	6a Gross Rents		3,461,422				
	b Less rental expenses		2,157,980				
	c Rental income or (loss)		1,303,442				
	d Net rental income or (loss)				1,303,442		1,303,442
			(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory		264,911,422				
	b Less cost or other basis and sales expenses		250,842,841				
	c Gain or (loss)		14,068,581				
	d Net gain or (loss)				14,068,581		14,068,581
	8a Gross income from fundraising events (not including \$ 153,607 of contributions reported on line 1c) See Part IV, line 18						
	a			192,821			
	b Less direct expenses b			181,872			
	c Net income or (loss) from fundraising events				10,949		10,949
	9a Gross income from gaming activities See Part IV, line 19 a						
	b Less direct expenses b						
c Net income or (loss) from gaming activities				0			
10a Gross sales of inventory, less returns and allowances							
a							
b Less cost of goods sold b							
c Net income or (loss) from sales of inventory				0			
Miscellaneous Revenue			Business Code				
11a Pass thru Investmt Pships			211110	69,549		69,549	
b							
c							
d All other revenue							
e Total. Add lines 11a-11d				69,549			
12 Total revenue. See Instructions				148,200,765		69,549	
					107,699,382	20,776,429	

Part IX

Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U S See Part IV, line 22	30,578,385	30,578,385		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	38,750	38,750		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	2,316,244		1,988,966	327,278
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	42,581,839	36,453,270	4,049,839	2,078,730
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,265,516	2,729,415	364,556	171,545
9	Other employee benefits	7,932,218	6,508,984	975,459	447,775
10	Payroll taxes	3,038,255	2,444,906	418,966	174,383
a	Fees for services (non-employees)				
	Management	0			
b	Legal	213,379	253	213,126	
c	Accounting	109,725		109,725	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	90,469			90,469
f	Investment management fees	1,181,961		1,181,961	
g	Other	2,350,555	1,565,030	649,048	136,477
12	Advertising and promotion	1,323,086	740,274	462,703	120,109
13	Office expenses	5,401,321	4,482,244	632,473	286,604
14	Information technology	2,288,729	1,526,128	726,237	36,364
15	Royalties	9,482	9,482		
16	Occupancy	10,689,360	9,165,603	1,412,078	111,679
17	Travel	4,459,585	3,672,045	469,671	317,869
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	1,159,179	1,037,831	67,321	54,027
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	10,361,464	9,919,610	344,177	97,677
23	Insurance	277,213	157,851	108,297	11,065
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	Off campus tuition,room,board	2,039,754	2,039,754		
b	Miscellaneous	1,324,578	783,535	518,033	23,010
c	Food purchases	4,094,055	4,094,023	32	
d	Facility maint , repairs, supp	1,498,313	1,227,551	254,792	15,970
e	Bad debts	1,264,684	17,616	1,147,068	100,000
f	All other expenses	180,262		362,134	-181,872
25	Total functional expenses. Add lines 1 through 24f	140,068,361	119,192,540	16,456,662	4,419,159
26	Joint costs. Check here ☒ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			27,644,778	1	5,101,324
	2	Savings and temporary cash investments			20,845,950	2	20,761,500
	3	Pledges and grants receivable, net			10,105,974	3	19,616,527
	4	Accounts receivable, net			4,501,822	4	1,356,327
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Schedule L				6	0
	7	Notes and loans receivable, net			558,564	7	5,227,587
	8	Inventories for sale or use			96,373	8	255,972
	9	Prepaid expenses and deferred charges			2,557,564	9	2,666,728
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a	240,334,164			
	b	Less: accumulated depreciation	10b	90,976,396	147,238,249	10c	149,357,768
	11	Investments—publicly traded securities			285,420,238	11	341,237,690
	12	Investments—other securities. See Part IV, line 11				12	0
	13	Investments—program-related. See Part IV, line 11			1,792,244	13	1,641,185
	14	Intangible assets				14	0
	15	Other assets. See Part IV, line 11			15,232,884	15	17,251,894
16	Total assets. Add lines 1 through 15 (must equal line 34)			515,994,640	16	564,474,502	
Liabilities	17	Accounts payable and accrued expenses			8,861,493	17	8,252,832
	18	Grants payable				18	
	19	Deferred revenue			2,614,759	19	2,839,485
	20	Tax-exempt bond liabilities			80,104,095	20	79,216,106
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			24,340,660	23	24,465,977
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities. Complete Part X of Schedule D			9,797,132	25	9,539,902
	26	Total liabilities. Add lines 17 through 25			125,718,139	26	124,314,302
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			129,778,812	27	140,489,282
	28	Temporarily restricted net assets			72,423,195	28	104,551,998
	29	Permanently restricted net assets			188,074,494	29	195,118,920
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			390,276,501	33	440,160,200
34	Total liabilities and net assets/fund balances			515,994,640	34	564,474,502	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	148,200,765
2	Total expenses (must equal Part IX, column (A), line 25)	2	140,068,361
3	Revenue less expenses Subtract line 2 from line 1	3	8,132,404
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	390,276,501
5	Other changes in net assets or fund balances (explain in Schedule O)	5	41,751,295
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	440,160,200

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	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	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 separate basis, consolidated 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?	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	Yes	

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization Rollins College	Employer identification number 59-0624440
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Part I

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

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

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☒

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other
- e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g

☐

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

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?
- h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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)						
12 Gross receipts from related activities, etc (See instructions)					12	
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))	14	
15 Public Support Percentage for 2009 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support test—2009. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶		
b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶		

Part IIIPart III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support							
Calendar year (or fiscal year beginning in)		(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support (Add lines 9, 10c, 11 and 12)						
14	First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage			
15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage			
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18	Investment income percentage from 2009 Schedule A, Part III, line 17	18	
19a	33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b	33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20	Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ▶		

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Additional Data

Software ID: 10000105
Software Version: 2010v3.2
EIN: 59-0624440
Name: Rollins College

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Winifred M Warden Trustee	2 00	X						0	0	0
William Short Asst Treasurer	50 00			X				118,839	0	34,417
William H Bieberbach Trustee	2 00	X						0	0	0
Victor A Zollo Jr Trustee	2 00	X		X				0	0	0
Toni Jennings Trustee	2 00	X						0	0	0
Thomas G Kuntz Trustee	2 00	X						0	0	0
Theodore B Alford Trustee	2 00	X						0	0	0
Susan Whealler Johnston Trustee	2 00	X						0	0	0
Samuel M Hocking Jr Trustee	2 00	X						0	0	0
Ronald Piccolo Professor	50 00					X		175,888	0	35,472
Ronald G Gelbman Trustee	2 00	X						0	0	0
Roger Casey Vice President	50 00			X				132,041	0	15,533
Robert L Cook Asst Treasurer	50 00			X				100,533	0	27,821
Robert B Ourisman Sr Trustee	2 00	X						0	0	0
Rick Goings Trustee	2 00	X						0	0	0
R Michael Strickland Trustee	2 00	X						0	0	0
Philip Tiedtke Trustee, SECTY	2 00	X						0	0	0
Michael Maher Trustee	2 00	X						0	0	0
Mark Johnston Professor	50 00					X		248,947	0	35,588
Lorraine M Kyle Asst Secretary	60 00			X				120,046	0	29,022
Lewis M Duncan Ph D President	80 00	X		X				379,187	0	162,700
Leslie Rose Asst Secretary	40 00			X				44,598	0	15,358
Laurie M Joyner Vice President	50 00			X				177,832	0	32,243
Kurt M Wells Trustee	2 00	X						0	0	0
Jordan Singleton Professor	0 00					X		222,993	0	32,584

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jon W Fuller Trustee	2 00	X						0	0	0
John C Myers III Trustee	2 00	X						0	0	0
Jeffrey G Eisenbarth Vice President	50 00			X				260,448	0	36,835
James Gerhardt Vice President	50 00			X				227,954	0	40,329
James E Chanin Trustee	2 00	X						0	0	0
Harold A Ward III Secretary	2 00	X		X				0	0	0
Halil Kiyamaz Professor	50 00					X		216,958	0	31,545
Greg Marshall Professor	50 00					X		184,947	0	82,293
Francis H Barker Trustee	2 00	X						0	0	0
F Duane Ackerman Chairman	2 00	X		X				0	0	0
Erin Wallace Trustee	2 00	X						0	0	0
Donna Tucker Asst Secretary	40 00			X				15,598	0	7,063
Dominick Cavouto Trustee	2 00	X						0	0	0
Dianne Rice Trustee	2 00	X						0	0	0
David H Lord Vice Chairman	2 00	X		X				0	0	0
David Erdmann Key Employee	50 00				X			177,573	0	31,108
Craig McAllaster Key Employee	50 00				X			214,590	0	38,155
Clay M Biddinger Trustee	2 00	X						0	0	0
Bruce A Beal Trustee	2 00	X						0	0	0
Barbara Ray Trustee	2 00	X						0	0	0
Andrew J Czekaj Sr Trustee	2 00	X						0	0	0
Allan E Keen Trustee	2 00	X						0	0	0
Alan H Ginsburg Trustee	2 00	X						0	0	0

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

2010

Open to Public
Inspection

Name of the organization
Rollins College

Employer identification number
59-0624440

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? YesNo	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit YesNo	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
2a	Total number of conservation easements
2b	Total acreage restricted by conservation easements
2c	Number of conservation easements on a certified historic structure included in (a)
2d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ►

4

Number of states where property subject to conservation easement is located ►

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

YesNo

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ►

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

YesNo

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

► \$

(ii) Assets included in Form 990, Part X

► \$

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

► \$

b

Assets included in Form 990, Part X

► \$

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

Cat No 52283D

Schedule D (Form 990) 2010

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☒

Public exhibition

b

☒

Scholarly research

c

☒

Preservation for future generations

d

☒

Loan or exchange programs

e

☐

Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☒ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance	290,860,985	269,821,869	391,619,076	
b	Contributions	22,451,930	1,566,480	2,520,986	
c	Investment earnings or losses	59,984,368	34,493,471	-109,426,666	
d	Grants or scholarships	5,188,499	5,038,509	4,911,812	
e	Other expenditures for facilities and programs	9,210,918	8,751,046	8,546,447	
f	Administrative expenses	1,297,271	1,231,280	1,433,268	
g	End of year balance	357,600,595	290,860,985	269,821,869	

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 25 750 %

b

Permanent endowment ▶ 74 250 %

c

Term endowment ▶

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations	3a(i) Yes	
(ii) related organizations	3a(ii)	No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	No

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	1,102,714	30,841,457		31,944,171
b Buildings	16,356,586	135,038,224	53,460,538	97,934,272
c Leasehold improvements	4,482,445		2,918,428	1,564,017
d Equipment	676,806	20,409,374	15,755,781	5,330,399
e Other	163,047	31,263,511	18,841,649	12,584,909
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				149,357,768

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	148,200,765
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	140,068,361
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	8,132,404
4	Net unrealized gains (losses) on investments	4	41,643,071
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	108,224
9	Total adjustments (net) Add lines 4 - 8	9	41,751,295
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	49,883,699

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements	1	161,602,740
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	43,837,238
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	181,872
e	Add lines 2a through 2d	2e	44,019,110
3	Subtract line 2e from line 1	3	117,583,630
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	30,617,135
c	Add lines 4a and 4b	4c	30,617,135
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	148,200,765

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements	1	108,451,137
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	181,872
e	Add lines 2a through 2d	2e	181,872
3	Subtract line 2e from line 1	3	108,269,265
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,181,961
b	Other (Describe in Part XIV)	4b	30,617,135
c	Add lines 4a and 4b	4c	31,799,096
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	140,068,361

Part XIVSupplemental Information

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

Identifier	Return Reference	Explanation
Part X	Part X FIN48 Footnote	The College's policy is to record a liability for any tax position taken that is beneficial to the College, including any related interest and penalties, when it is more likely than not the position taken by management with respect to a transaction or class of transactions will be overturned by a taxing authority upon examination. Management believes there are no such positions as of May 31, 2011 and, accordingly, no liability has been accrued.
Part XIII, Line 4b	Part XIII, Line 4b Other revenue amounts included on 990 but not included in F/S	Scholarships \$30617135
Part XIII, Line 2d	Part XIII, Line 2d Other expenses and losses per audited F/S	Direct fundraising exp reported Line 9b \$181872
Part XII, Line 4b	Part XII, Line 4b Other revenue amounts included on 990 but not included in F/S	Scholarships \$30617135
Part XII, Line 2d	Part XII, Line 2d Other revenue amounts included in F/S but not included on form 990	Direct fundraising exp reported Line 9b \$181872
Part XI, Line 8	Part XI, Line 8 Other Changes in Net Assets or Fund Balances	Change in value - split interest agreements \$108224
Part V, Line 4	Part V, Line 4 Intended uses of the endowment fund	Endowment distribution supports expenditures such as Scholarships, Professor Salaries & Faculty Development, Library Resources, the Athletic Program, the Cornell Fine Arts Museum, Academic Program Support and Plant Maintenance.
Part III, Line 4	Part III, Line 4 Description of organization's collections and how it furthers its purpose	Cornell Fine Arts Museum collection. The Cornell Fine Arts Museum (CFAM) has more than 5,000 objects from antiquity to the contemporary. Major collection works include Renaissance and Old Masters with additional strengths in landscape and portraiture and a collection of work from the Bloomsbury Circle. CFAM mission and how accomplished: CFAM educates, enriches and engages students and the public through exhibitions and an array of programs. Curatorial and educational staff members illustrate links between works of art and a variety of curricula. CFAM enhances traditional classroom learning across all disciplines with docent-led tours, teacher workshops, films, public programs including lectures by Distinguished Visiting Scholars and Artists, and other activities such as CFAMiles, an art project for children of all ages and adults to enjoy together. The museum offers free admission to all student visitors.
Part III, Line 1a	Part III, Line 1a If organization elected under SFAS 116 to not report are, historical treasures, o	The College does not record or capitalize its collections of works of art, historical treasures or similar assets. These collections are held for public exhibition, education and research in furtherance of the College's educational and public service mission. The collections are appropriately cared for and preserved and are subject to a College policy that requires the proceeds from sales, if any, of collection items to be used to acquire other items for the collection.

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
Rollins College

Employer identification number
59-0624440

Part I

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?

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?

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 Part II

4

Does the organization maintain the following?

a

Records indicating the racial composition of the student body, faculty, and administrative staff?

b

Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?

c

Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?

d

Copies of all material used by the organization or on its behalf to solicit contributions?

If you answered "No" to any of the above, please explain If you need more space, use Part II

5

Does the organization discriminate by race in any way with respect to

a

Students' rights or privileges?

b

Admissions policies?

c

Employment of faculty or administrative staff?

d

Scholarships or other financial assistance?

e

Educational policies?

f

Use of facilities?

g

Athletic programs?

h

Other extracurricular activities?

If you answered "Yes" to any of the above, please explain If you need more space, use Part II

6a

Does the organization receive any financial aid or assistance from a governmental agency?

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 Part II

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 Part II

YES

NO

1

Yes

2

Yes

3

Yes

4a

Yes

4b

Yes

4c

Yes

4d

Yes

5a

No

5b

No

5c

No

5d

No

5e

No

5f

No

5g

No

5h

No

6a

Yes

6b

No

7

Yes

Part III Supplemental Information

Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions).

Identifier	Return Reference	Explanation
Schedule E, Line 3 - Racially Nondiscriminatory Policy Publicized		Nondiscriminatory policies are stated in advertisements soliciting student enrollment, in class schedules and in student recruiting brochures

OMB No 1545-0047

Open to Public Inspection

59-0624440

3 Activities per Region (Use Part V if additional space is needed)

Schedule F (Form 990) 2010

1

2 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 ▶ _____

3 Enter total number of other organizations or entities ▶ _____

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 Part V if additional space is needed.

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☒ Yes ☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐ Yes ☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☐ Yes ☒ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☒ Yes ☐ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☒ Yes ☐ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☐ Yes ☒ No

Part V Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Identifier	Return Reference	Explanation
Grantmaker's Description of How Grants are Used in Foreign Country		Potential grant recipients complete applications that are specific to a particular grant funding source. The Financial Aid office reviews applications to determine that eligibility requirements such as GPA, credit hours and residency and enrollment status are met. Student applicants receive an award letter identifying the funding programs and award amounts. Awards are applied as non-cash credit to student accounts receivable to further ensure that proceeds are utilized for the intended purposes. The Registrar's office provides information such as withdrawal notices to facilitate the Financial Aid office in periodically monitoring eligibility criteria and ensuring that funds not utilized for the intended purpose are returned to the original funding program.

Additional Data

Software ID: 10000105
Software Version: 2010v3.2
EIN: 59-0624440
Name: Rollins College

Form 990 Schedule F Part I - Activities Outside The United States

(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
Europe	0	0	Program-London, U K	Field Study	31,474
Europe	0	0	Program-Pompei & Rome	Alternative Spg Brk	18,121
East Asia/Pacific	0	0	Program-Thailand	Field Study	40,046
Middle East	0	0	Program-Israel	Field Study	23,919
South Asia	0	0	Program-MakingLivesBetter	Field Study Nepal	49,500
Europe	0	0	Program-United Kingdom	Field Study	19,403
Central Am and Caribbean	0	0	Program-Dominican Rep	Field Study	14,244
Central AM and Caribbean	0	0	Program-Costa Rica	Field Study	91,360
Middle East and N Africa	0	0	Program-Morocco	Field Study	40,214
East Asia and Pacific	0	0	Program-China, Hong Kong	Study Abroad	5,077
Middle East	0	0	Program-Morocco	Study abroad	10,085
Europe	0	0	Program-Madrid, Spain	Study abroad	146,094
Europe	0	0	Program-Trier, Germany	Study abroad	2,180
Europe	0	0	Program-London, U K	Study abroad	420,911
Europe	0	0	Program-Lancaster, U K	Affiliate program	55,137
Europe	0	1	Program-Asturias, Spain	Study abroad	157,511
Europe	0	0	Program-Paris, France	Affiliate program	40,236
Europe	0	0	Program-Athens, Greece	Affiliate program	35,266
Europe	0	0	Program-RAP Trinity,Italy	Study abroad	165,579
Europe	0	0	Program-Scotland, U K	Field study	24,032
East Asia/Pacific	0	1	Program-Sydney, Australia	Study abroad	395,025
East Asia/Pacific	0	0	Program-Shanghai, China	Study abroad	330,710
East Asia/Pacific	0	0	Program-Japan	Study abroad	3,007
Central America/Caribb	0	0	Program-Galapagos Ecuador	Field Study	30,331

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
Rollins College

Employer identification number
59-0624440

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1

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

a

☒

Mail solicitations

b

☒

Internet and e-mail solicitations

c

☒

Phone solicitations

d

☒

In-person solicitations

e

☒

Solicitation of non-government grants

f

☒

Solicitation of government grants

g

☒

Special fundraising events

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes

☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
RuffaloCODY Kirkwood N RdSW Cedar Rapids, IA 52404	Telemarketing		No	196,580	90,469	106,111
Total ▶				196,580	90,469	106,111

3

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

FL

Part II Fundraising Events.

Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

Revenue			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
			Starry, Starry Night	Dr. Edward Moses		(Add col (a) through
			(event type)	Golf Tournament	(total number)	col (c))
				(event type)		
	1	Gross receipts	281,043	65,385		346,428
	2	Less Charitable contributions	106,942	46,665		153,607
	3	Gross income (line 1 minus line 2)	174,101	18,720		192,821
Direct Expenses	4	Cash prizes				
	5	Non-cash prizes		4,000		4,000
	6	Rent/facility costs	1,200			1,200
	7	Food and beverages	33,325	14,212		47,537
	8	Entertainment	2,168			2,168
	9	Other direct expenses	115,463	11,504		126,967
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶				181,872
	11	Net income summary Combine lines 3 and 10 in column (d). ▶				10,949

Part III Gaming.

Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
						(Add col (a) through col (c))
Direct Expenses	1	Gross revenue				
	2	Cash prizes				
	3	Non-cash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶				

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

11

Does the organization operate gaming activities with nonmembers?

☐ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a
b	An outside facility	13b

14

Provide 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?

☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$

c

If "Yes," enter name and address

Name

Address

16 Gaming manager information

Name

Gaming manager compensation \$

Description of services provided

☐ Director/officer

☐ Employee

☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

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 \$

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
------------	-----------------	-------------

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
Rollins College

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

OMB No 1545-0047

2010

Open to Public
Inspection

Employer identification number

59-0624440

Part I General Information on Grants and Assistance

1

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

☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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. Part II can be duplicated if additional space is needed. ▶ ☒

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code 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

2

Enter total number of section 501(c)(3) and government organizations

0

3

Enter total number of other organizations

0

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)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Additional Data Table					

Part IV

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

Identifier	Return Reference	Explanation
Grantmaker's Description of How Grants are Used		Potential grant recipients complete applications that are specific to a particular grant funding source. The Financial Aid office reviews applications to determine that eligibility requirements such as GPA, credit hours and residency and enrollment status are met. Student applicants receive an award letter identifying the funding programs and award amounts. Awards are applied as non-cash credit to student accounts receivable to further ensure that proceeds are utilized for the intended purposes. Enrollment data is reviewed daily by the Financial Aid office to assure that students remain enrolled. The Registrar's office provides information such as withdrawal notices to facilitate the Financial Aid office in periodically monitoring eligibility criteria and assuring that funds not utilized for the intended purpose are returned to the original funding program.

Software ID: 10000105
Software Version: 2010v3.2
EIN: 59-0624440
Name: Rollins College

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Scholarships - Hamilton Holt School	29		33,300		Tuition & related expenses
Scholarships - Crummer Graduate School	149		1,905,518		Tuition & related expenses
Rollins grants	651		10,228,997		Tuition & related expenses
Other assistance	67		101,727		Tuition & related expenses
Merit Scholarships	593		5,899,843		Tuition & related expenses
Merit scholarships	194		291,368		Laptop computers
Government grants	236		301,075		Tuition & related expenses
Endowed Scholarships	538		6,635,255		Tuition & related expenses
Donated Scholarships	432		443,762		Tuition & related expenses
Cornell Scholars	36		1,573,048		Tuition & related expenses
Athletic grants	137		3,191,143		Tuition & related expenses

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2010

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

Rollins College

Employer identification number

59-0624440

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	☐ First-class or charter travel ☒ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☒ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	☒ Compensation committee ☒ Written employment contract ☒ Independent compensation consultant ☒ Compensation survey or study ☒ Form 990 of other organizations ☒ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	Yes
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	Yes

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) William Short	(i) (ii)	118,839			12,805	21,612	153,256	
(2) Ronald Piccolo	(i) (ii)	175,888			12,900	22,572	211,360	
(3) Mark Johnston	(i) (ii)	248,947			14,061	21,527	284,535	
(4) Lewis M Duncan Ph D	(i) (ii)	379,187			24,500	138,200	541,887	
(5) Laurie M Joyner	(i) (ii)	177,832			17,368	14,875	210,075	
(6) Jordan Singleton	(i) (ii)	222,993			17,060	15,524	255,577	
(7) Jeffrey G Eisenbarth	(i) (ii)	260,448			24,500	12,335	297,283	
(8) James Gerhardt	(i) (ii)	227,954			20,500	19,829	268,283	
(9) Halil Kiyamaz	(i) (ii)	216,958			12,262	19,283	248,503	
(10) Greg Marshall	(i) (ii)	184,947			14,072	68,221	267,240	
(11) David Erdmann	(i) (ii)	177,573			17,425	13,683	208,681	
(12) Craig McAllaster	(i) (ii)	214,590			21,817	16,338	252,745	
(13)								
(14)								
(15)								
(16)								

Part III **Supplemental Information**

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

Identifier	Return Reference	Explanation
Sch J, Part I, Line 8	Part I, Line 8 Amounts reported on 990 VII pursuant to initial contract exemption described in Regs	
Sch J, Part I, Line 1a	Part I, Line 1a Relevant information in regards to selections on 1a	

Schedule K (Form 990)	Supplemental Information on Tax Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ▶ Attach to Form 990. ▶ See separate instructions.										OMB No 1545-0047		
											2010		
	Department of the Treasury Internal Revenue Service											Open to Public Inspection	
Name of the organization Rollins College										Employer identification number 59-0624440			

Part I Bond Issues

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A Orange County Educational Facilities Authority	59-3445650	684499BV7	09-07-2007	25,581,853	Acquire/construct educational facilities, equipment & land		X		X		
B Higher Educational Facilities Financing Auth Rev Bonds	90-0058227	34073TBU0	04-29-2010	37,121,260	Refund 08 OCEFA/Renovate capital projects		X		X		

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired	435,000							
2	Amount of bonds legally defeased								
3	Total proceeds of issue	25,581,853		37,121,260					
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrow								
7	Issuance costs from proceeds	569,012		316,260					
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	25,012,841		8,200,000					
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion	2009		2011		YesNoYesNo			
		Yes	No	Yes	No				
14	Were the bonds issued as part of a current refunding issue?		X	X					
15	Were the bonds issued as part of an advance refunding issue?		X		X				
16	Has the final allocation of proceeds been made?	X		X					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

Part III Private Business Use

				A		B		C		D	
				Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?				X		X				
2	Are there any lease arrangements that may result in private business use of bond-financed property?			X		X					

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?	X		X					
b	Are there any research agreements that may result in private business use of bond-financed property?		X		X				
c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		X		X				
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 700 %		0 100 %					
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5	0 700 %		0 100 %					
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X					

Part IV

Arbitrage

		A		B		C		D	
		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		X				
2	Is the bond issue a variable rate issue?		X		X				
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X		X				
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		X		X				
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		X		X				
6	Did the bond issue qualify for an exception to rebate?	X		X					

Part V

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Identifier	Return Reference	Explanation

Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
Rollins College

Employer identification number
59-0624440

Part I

Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II

Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total ▶ \$										

Part III

Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance

Part IV

Business Transactions Involving Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) Sudie Eisenbarth	Family member	59,200	Employment services		No
(2) Robyn Allers	Family member	13,672	Employment services		No
(3) Paula Hammer	Family member	39,132	Employment services		No

Part V

Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
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SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

2010

Open to Public Inspection

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

Name of the organization
Rollins College

Employer identification number
59-0624440

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining oncash contribution amounts
1 Art—Works of art	X	32		
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles .				
7 Boats and planes				
8 Intellectual property . .				
9 Securities—Publicly traded	X	9	411,599	
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests .				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other . .				
15 Real estate—Residential .				
16 Real estate—Commercial				
17 Real estate—Other . .				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts . .				
23 Scientific specimens . .				
24 Archeological artifacts .				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement			29	
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?				Yes No
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?				Yes
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?				No
b If "Yes," describe in Part II				
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II				

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.

Identifier	Return Reference	Explanation
Part I, Line 33, Revenues Not Reported		A zero amount was reported on Form 990, Part VIII, 'Statement of Revenues', line 1g, because Rollins College does not capitalize its Cornell Fine Arts Museum's collections as allowed under SFAS 116 (ASC 958-360-25)

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ****Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.**

OMB No 1545-0047

2010**Open to Public
Inspection****Name of the organization**
Rollins College**Employer identification number**

59-0624440

Identifier	Return Reference	Explanation
	Form 990, Part VI, Line 1a	Honorary Trustees (a)Honorary Trustees shall be entitled to attend all meetings of the Board of Trustees and all meetings of the Executive Committee, the Finance Committee, the Education Committee, and the Development and Alumni Relations Committee, but Honorary Trustees shall not be entitled to vote at meetings of the Board or at meetings of any committee of the Board except as provided below (b)Honorary Trustees shall be eligible for appointment or election to any standing or special committee of the Board, and if appointed or elected, they shall be entitled to vote Executive Committee (a)The Board of Trustees exercises its responsibility for the overall supervision of the College between meetings of the Board through its Executive Committee The Chairman of the Board is a member of the Executive Committee and Chairman thereof The President of the College and the Vice Chairman of the Board are members of the Executive Committee The Secretary of the College is the Secretary of the Executive Committee and keeps a full record of all of its transactions and proceedings The Executive Committee performs such further functions as shall be specifically delegated or authorized by the Board of Trustees at a regular or special meeting (b)The Executive Committee will (1)Review regularly the functions and operations of the College,(2) Review and approve recommendations by the President of the College with respect to the functions and operations of the College,(3)Carry out the functions of the Board of Trustees between meetings of the Board

Identifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	Description of published documents Rollins College publishes its Conflict of Interest Policy on its website, which is available to the general public The College also publishes its audited financial statements online The College's bylaws are not published or made available to the general public

Identifier	Return Reference	Explanation
Form 990, Part VI, Line 15b	Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	Description of process of determining compensation of Officers and Key Employees [other than President] Rollins College has a Compensation Committee chartered by the Board of Trustees. In addition to compensation areas related to the President, the Compensation Committee is also charged with reviewing a summary of the President's evaluation of the Vice Presidents, and reviewing and approving the President's recommendation for all elements of the compensation for the Vice Presidents. As to officers and key employees of the College below the level of Vice President, the compensation level is determined by the immediate supervisor and/or the head of the department, which is typically a Vice President or Dean of the College. In any case where the compensation approver is not a Dean or Vice President, at least two approvals are required--the immediate supervising manager and his or her manager at the next higher level.

Identifier	Return Reference	Explanation
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	Description of Conflict of Interest monitoring and enforcement During the spring of each year the College canvasses all Trustees, who are asked to complete a Conflict of Interest disclosure form noting any membership(s) in for-profit boards and any not-for-profit boards. Additionally, they are asked to indicate whether they hold a 5% or greater ownership interest in these organizations. All College officers, Directors, and Key Employees are also required to complete a Conflict of Interest disclosure form. Each College staff person as identified above, also signs a statement confirming whether or not a conflict exists. A summary document (spreadsheet) is prepared by the President's Office that includes all Trustees and Officers of the College. This document is presented to and reviewed in detail by the Audit Committee, usually at the May meeting each year.

Identifier	Return Reference	Explanation
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	Description of Form 990 review process A review of the full Form 990 including Schedule B is conducted by the President, CFO/VP Treasurer, AVP/Director of Finance, and Audit Committee of the Board of Trustees Actionable questions or comments are addressed and resolved The Form 990 including Schedule B is provided to the full Board of Trustees Actionable questions or comments are addressed and resolved before the Form 990 is filed

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
Rollins College

Employer identification number
59-0624440

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) Langford RCI LLC 1000 Holt Avenue - CB 2715 Winter Park, FL 327894499 59-0624440	Acquire real property	FL			Rollins College
(2) Holt Properties LLC 1000 Holt Avenue - CB 2715 Winter Park, FL 327894499 59-0624440	Acquire real property	FL			Rollins College

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No

Part III

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproporionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							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.)

(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

Part V

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

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to other organization(s)

c

Gift, grant, or capital contribution from other organization(s)

d

Loans or loan guarantees to or for other organization(s)

e

Loans or loan guarantees by other organization(s)

f

Sale of assets to other organization(s)

g

Purchase of assets from other organization(s)

h

Exchange of assets

i

Lease of facilities, equipment, or other assets to other organization(s)

j

Lease of facilities, equipment, or other assets from other organization(s)

k

Performance of services or membership or fundraising solicitations for other organization(s)

l

Performance of services or membership or fundraising solicitations by other organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets

n

Sharing of paid employees

o

Reimbursement paid to other organization for expenses

p

Reimbursement paid by other organization for expenses

q

Other transfer of cash or property to other organization(s)

r

Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2010

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.

[illegible]

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
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