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DLN: 93493135007472

Department of the Treasury

### Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

Open to Public

Internal Revenue Service Inspection calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011 A For the 2010 D Employer identification number B Check if applicable WILLIAM & MARY BUSINESS SCHOOL FOUNDATION 23-7079011 Address change Doing Business As Name change E Telephone number Initial return Number and street (or P O box if mail is not delivered to street address) (757)221-2294PO BOX 2220 Terminated G Gross receipts \$ 14,551,639 Amended return City or town, state or country, and ZIP + 4 WILLIAMSBURG, VA 23187 Application pending Name and address of principal officer **H(a)** Is this a group return for affiliates? Yes PO BOX 2220 **H(b)** Are all affiliates included? WILLIAMSBURG, VA 23187 If "No," attach a list (see instructions) H(c) Group exemption number ▶ **▼** 501(c)(3) 501(c) ( ) ◀ (insert no ) ☐ 4947(a)(1) or ☐ 527 Tax-exempt status Website: ► N/A K Form of organization ✓ Corporation ✓ Trust ✓ Association ✓ Other ► L Year of formation 1972 M State of legal domicile VA Summary Part I 1 Briefly describe the organization's mission or most significant activities PROVIDE SUPPORT FOR PUBLIC INSTITUTION OF HIGHER EDUCATION Activities & Governance 2 Check this box 📂 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . . 40 Number of independent voting members of the governing body (Part VI, line 1b) . 4 40 5 0 Total number of individuals employed in calendar year 2010 (Part V, line 2a) . 6 0 Total number of volunteers (estimate if necessary) . . . . 7a 8.913 7a Total unrelated business revenue from Part VIII. column (C), line 12. **b** Net unrelated business taxable income from Form 990-T, line 34 **7**b 0 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 2,786,653 1,589,434 Revenue 2,564,274 4,143,530 Program service revenue (Part VIII, line 2g) . 313,650 448,110 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 0 11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 5.664.577 6.181.074 13 10,196,676 2,450,250 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 1.482.665 641,132 5 - 10)16a Professional fundraising fees (Part IX, column (A), line 11e) . . . 0 0 Total fundraising expenses (Part IX, column (D), line 25)  $\blacktriangleright$  482,307 b **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . 2,700,713 3,686,156 14,380,054 6,777,538 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -8,715,477 19 Revenue less expenses Subtract line 18 from line 12 . -596,464 (Assets or de Balances **Beginning of Current End of Year** Year 20 Total assets (Part X, line 16) . 46,023,429 47,458,792 21 469,991 394,131 Total liabilities (Part X, line 26) . 22 45.553.438 47.064.661 Net assets or fund balances Subtract line 21 from line 20 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. 2012-05-14 Signature of officer Date Sign Here AWRENCE B PULLEY VICE CHAIR/BOARD OPERATIONS Type or print name and title Print/Type preparer's name Preparer's signature Check if self Date PTIN

CHRISTOPHER T

CHRISTOPHER T

GLEN ALLEN, VA 230603394

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

BENNETT CPA

Firm's name 🕨 DIXON HUGHES GOODMAN LLP

Firm's address 🕨 4510 COX ROAD SUITE 200

Paid

Preparer

**Use Only** 

employed 🕨 🔽

Phone no 🕨 (804) 282-

**▼** Yes

Form 990	(2010)
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Page <b>2</b>
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Par	Tt IIII Statement of P Check if Schedule (				II	
1	Briefly describe the organ	ızatıon's mıssıon				
	PROVIDE SUPPORT FOR T					HIGHER LEARNING,
2	Did the organization under the prior Form 990 or 990		nt program se	rvices during the ye	ear which were not listed o	n
	If "Yes," describe these ne	w services on Scl	hedule O			
3	Did the organization cease services?			t changes in how it	conducts, any program	ΓYes Γ No
	If "Yes," describe these ch	nanges on Schedu	le O			
4	Describe the exempt purposection 501(c)(3) and 50 allocations to others, the t	1 (c)(4) organizati	ons and sectio	on 4947(a)(1) trust	s are required to report the	
4a	(Code	) (Expenses \$	2,021,682	ıncludıng grants of \$	1,462,158 ) (Revenu	e \$ 2,191,528 )
		BOOKS, CASES, COM	IPUTER HARDWAI	RE AND SOFTWARE FOR		LLY STUDENT TUITION DUE TO THE ISING & MEALS, STUDENT ATTENDED
4b	(Code	) (Expenses \$	3,265,911	including grants of \$	987,219 ) (Revenu	e \$ 743,655)
					TO PUBLIC INSTITUTION OF HIGI RESEARCH, AND OTHER MATER	HER EDUCATION FUNDING SUPPORTS IAL EDUCATIONAL SUPPORT
<b>4</b> c	(Code	) (Expenses \$	533,248	including grants of \$	873 ) (Revenu	e \$ 1,208,347 )
	PROFESSIONAL SEMINARS - 29 PROGRAMS AND OTHER MATER		6 PARTICIPANTS	- SUPPORT PROVIDED	TO PUBLIC INSTITUTION OF HIG	HER EDUCATION FOR ACADEMIC
4d	Other program services	•	,			
	(Expenses \$	ınclu	ıdıng grants of	\$	) (Revenue \$	)
4e	Total program service ex	penses <b>⊢</b> \$	5,820,84	1		

art TV	Checl	clist of	Required	Schedules
		11136 01	IXCUUII CU	Schoules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (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? If "Yes," complete Schedule C, Part $I$	3		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	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? If "Yes," complete Schedule C, Part III	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? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasiendowments? If "Yes," complete Schedule D, Part $V^{\bullet}$	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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	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? If "Yes," complete Schedule D, Part VII.	11b	Yes	
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? If "Yes," complete Schedule D, Part VIII.	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? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
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)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV .	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule $H$	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II $\textcircled{\textbf{5}}$	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		N o
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $			
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  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
La	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 93			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1</b> c		
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
la	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
la	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		No
b	If "Yes," enter the name of the foreign country   See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
ia	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		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
,	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
)	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Initiation fees and capital contributions included on Part VIII, line 12			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
c	In which the organization is licensed to issue qualified health plans  Enter the amount of reserves on hand  13c			
<b>[</b> 4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a		140

THE ORGANIZATION PO BOX 2220

(757) 221-2294

WILLIAMSBURG, VA 23187

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ction A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax									
	year									
b	Enter the number of voting members included in line 1a, above, who are independent									
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?									
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No						
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following									
а	The governing body?	8a	Yes							
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						
	ction B. Policies (This Section B requests information about policies not required by the Internal	•								
Re	venue Code.)	1								
40-	December of the control of the contr	10-	Yes	No						
	Does the organization have local chapters, branches, or affiliates?	10a		No						
D	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								
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?									
		11a		No_						
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	451	v							
c	to conflicts?	12b	Yes							
	describe in Schedule O how this is done	12c	Yes							
13	Does the organization have a written whistleblower policy?	13		N o						
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								
	ction C. Disclosure									
17	List the States with which a copy of this Form 990 is required to be filed ►AL, AK, AZ, AR, CA, CO, CT, DE, D  IL, IN, IA, KS, KY, NC, NM, NJ, NH									
	MS, MN, MI, MA, MD, ME, ND, OH,									
	SC, SD, TN, TX, UT, VT, VA, WA, W									
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 🕨

## <u>Part VIII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

Check this box if neither the organ	nization nor any r	<u>elated o</u>	rgan	zatio	on c	ompen	sate	d any current office	er, director, or trust	ee
(A) Name and Title	(B) Average hours	Average Position (check all hours that apply)						( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Highest compensated employee Key employee Officer Institutional Trustee or director		Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
See Additional Data Table										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	<b>(A)</b> Name and Title	(B) A verage hours		(ition i that a			Ш		Rep comp	( <b>D)</b> ortable ensation	(E) Reportable compensatio	n	(F) Estima amount o	ted f other
		per week (describe hours for related	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organiz	m the zation (W- 9-MISC)	from related organization: (W- 2/1099 MISC)	s	compens from t organızatı relate organıza	he on and ed
		organizations in Schedule O)	tiustee	Trustee	<u> </u>	oyee	pensated	<u> </u>						
See A	Additional Data Table													
				_			_	_						
				<u> </u>										
				<u> </u>	<u> </u>	<u> </u>	<u> </u>							
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				<u> </u>	<u> </u>	$\vdash$		<u> </u>						
1b	Sub-Total		<u></u>	<u></u>	<u> </u>	٠.	<u>.</u> .	<u> </u>						
С	Total from continuation sheets						<b> -</b> -							
d	Total (add lines 1b and 1c) .							<b>F</b>		50,838		0		15,904
2	Total number of individuals (incl \$100,000 in reportable compen	_				ted	above	) who	receive	ed more tha	n			
													Yes	No
3	Did the organization list any <b>for</b> on line 1a? <i>If</i> "Yes," complete Sci					eye	mploy •	ee, o	r highes • • •	t compens	ated employee	3		No
4	For any individual listed on line is organization and related organization and related organizations.											4		No
5	Did any person listed on line 1a services rendered to the organiz									janization d	or individual for	_		No
	ection B. Independent Con  Complete this table for your five		neated:	ından	ond.	ant 1	contra	ctoro	that roa	salvad mar	a than			
	\$100,000 of compensation from			muep	enu	= 11L (	Jonera		i illat 180	.eiveu iiioi	= ciiaii			
	Nor	(A)	drocc							Docc	(B)		(C)	)

(A) Name and business address	<b>(B)</b> Description of services	<b>(C)</b> Compensation
233 FOURTH AVENUE 11TH FLOOR	ADVERTISING FOR THE W&M MASON SCHOOL OF	474,802
JAMES R BRADLEY 104 MALVERN CIRCLE WILLIAMSBURG, VA 23185	SEMINAR INSTRUCTOR	121,755
Total number of independent contractors (including but not limited to those listed above)	who received more than	

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

Form 99		2010) Statement of Revenue					P	age <b>9</b>
Pal CV		Statement of Revenue			<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	excluded from tax under sections 512, 513, or
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns		1,589,434 1,502,886 Business Code	1,589,434			514
Program Service Revenue	d e f	EXEC MBA PROGRAM  SEMINARS FEES OTHER REVENUE  All other program service revenue  Total. Add lines 2a-2f		611600 611710 611710 6117710	2,185,287 1,145,552 659,351 153,340 4,143,530	1,145,552 659,351 153,340		
	4 5 6a b	Investment income (including divided and other similar amounts)	ond proceeds	(II) Personal	137,546		8,913	128,63
	7a b c d	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss)  Net gain or (loss)	8,681,129  8,370,565  310,564	(II) O ther	310,564			310,56
Other Revenue	b c 9a b c 10a b c	(not including  \$ of contributions reported on line 1 See Part IV, line 18  Less direct expenses  Net income or (loss) from fundrais Gross income from gaming activit Less direct expenses  Net income or (loss) from gaming Gross sales of inventory, less returns and allowances .  Less cost of goods sold  Net income or (loss) from sales of Miscellaneous Revenue	a b Ing events • es See Part IV, line 19 . a b activities •	Business Code				
	e	All other revenue  Total. Add lines 11a-11d  Total revenue. See Instructions	<b>.</b> •		6,181,074	4,143,530	8,913 orm <b>990</b> (2	

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

Δ	Section $501(c)(3)$ and $501(c)(4)$ organizations must omplete column (A) but are not required to $c$			(D)	
Do no	ot include amounts reported on lines 6b, p, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	2,450,250	2,450,250		·
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22		, ,		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	17,238		17,238	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	499,304	55,000	236,180	208,124
8	Pension plan contributions (include section $401(k)$ and section $403(b)$ employer contributions)	40,741	5,125	16,097	19,519
9	Other employee benefits	48,760	2,752	31,215	14,793
10	Payroll taxes	35,089	3,343	16,625	15,121
а	Fees for services (non-employees) Management				
b	Legal				
C	Accounting	48,456		48,456	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	2,000	2,000		
g	Other	147,283	138,083		9,200
12	Advertising and promotion	510,497	510,497		
13	Office expenses	113,207	50,824	50,799	11,584
14	Information technology	468,731	452,850	1,412	14,469
15	Royalties				
16	Occupancy	6,240	6,240		
17	Travel	234,045	180,961	13,660	39,424
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,976,573	1,815,278	11,222	150,073
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	9,638		9,638	
23 24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of	2,500		2,500	
а	line 25, column (A) amount, list line 24f expenses on Schedule O) BUSINESS MEALS	62,554	62,554		
a b	ARTWORK	47,350	47,350		
C	MEMBERSHIP FEES	29,662	21,842	7,820	
d	BAD DEBT	27,420	15,892	11,528	
u e	0.00 0.001	27,420	13,692	11,320	
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	6,777,538	5,820,841	474,390	482,307
26	Joint costs. Check here ► If following	0,777,338	3,020,041	474,390	402,307
20	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				

Pa	rt X	Balance Sheet				
				(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing		1,299,133	1	3,946,663
	2	Savings and temporary cash investments		15,013,207	2	15,446,553
	3	Pledges and grants receivable, net		11,662,605	3	8,199,806
	4	Accounts receivable, net		127,454	4	605,142
	5	Receivables from current and former officers, directors, trustees, highest compensated employees Complete Part II of	key employees, and			
		Schedule L			5	
	6	Receivables from other disqualified persons (as defined under se persons described in section $4958(c)(3)(B)$ , and contributing emsponsoring organizations of section $501(c)(9)$ voluntary employed organizations (see instructions)	ployers, and			
\$		Schedule L			6	_
ssets	7	Notes and loans receivable, net			7	
⋖	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		143,864	9	141,702
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	95,278 <b>10a</b>	3		
	b	Less accumulated depreciation	<b>10b</b> 75,479	16,568	10c	19,799
	11	Investments—publicly traded securities		549,449	11	737,247
	12	Investments—other securities See Part IV, line 11		16,876,856	12	17,522,926
	13	Investments—program-related See Part IV, line 11		0	13	
	14	Intangible assets			14	_
	15	Other assets See Part IV, line 11		334,293	15	838,954
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)		46,023,429	16	47,458,792
	17	Accounts payable and accrued expenses .		326,666	17	273,406
	18	Grants payable			18	
	19	Deferred revenue		143,325	19	120,725
	20	Tax-exempt bond liabilities			20	
<u> </u>	21	Escrow or custodial account liability Complete Part IV of Schedule	D		21	
bilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified				
Lia		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties .			24	
	25	Other liabilities Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		469,991	26	394,131
		Organizations that follow SFAS 117, check here ▶ 🔽 and comple	ete lines 27			_
9		through 29, and lines 33 and 34.				
<u>8</u>	27	Unrestricted net assets		29,452	27	1,401,867
Fund Balances	28	Temporarily restricted net assets		11,510,965	28	11,655,028
몯	29	Permanently restricted net assets		34,013,021	29	34,007,766
		Organizations that do not follow SFAS 117, check here ► and	l complete			
ō		lines 30 through 34.			_	
	30	Capital stock or trust principal, or current funds			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other fur	ıds		32	
¥	33	Total net assets or fund balances		45,553,438		47,064,661
	34	Total liabilities and net assets/fund balances		46,023,429	34	47,458,792

	Check if Schedule O contains a response to any question in this Part XI			ᅱ.	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6 1	181,07
2	Total expenses (must equal Part IX, column (A), line 25)	2			777,538
3	Revenue less expenses Subtract line 2 from line 1	3		- 5	596,46
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		45,5	553,43
5	Other changes in net assets or fund balances (explain in Schedule O)	5		2,1	107,68
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		47,0	064,66
Par	The contains a response to any question in this Part XII		•	৮	1
1	Accounting method used to prepare the Form 990			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight o 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 Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	ıssued			
	Separate basis Consolidated basis Both consolidated and separated basis		l		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?		За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

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OMB No 1545-0047

## **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

WILLIAM & MARY BUSINESS SCHOOL FOUNDATION

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.

Inspection

**Employer identification number** 

23-7079011

	rt I			blic Charity Stat	<del></del>					structions				
The	organı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	ınes 1 throu	gh 11, check	only one bo	x )					
1	Γ	A churc	ch, conventi	on of churches, or as	ssociation of	churches de	escribed in <b>se</b>	ection 170(b	)(1)(A)(i).					
2	Γ	A scho	ol described	in <b>section 170(b)(1</b>	. <b>)(A)(ii).</b> (At	tach Schedu	le E)							
3	Γ	A hosp	ıtal or a coo	perative hospital sei	rvice organiz	atıon descrı	bed in <b>sectio</b>	n 170(b)(1)	(A)(iii).					
4	Γ			n organization operat ty, and state	ced in conjun	ction with a	hospital desc	cribed in <b>sec</b>	tion 170(b)(1	L <b>)(A)(iii).</b> En	iter the			
5	<u>~</u>			erated for the benefit		or universit	y owned or o	perated by a	government	al unit descri	ibed in			
	_			A)(iv). (Complete P	-									
6	<u> </u>	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).												
7	l	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	Г			described in <b>section</b>		A)(vi) (Com	plete Part II	)						
9	Ē			at normally receives					outions, mem	bership fees.	and gross			
		_		ities related to its ex							=			
				oss investment incoi	•	_								
			_	janızatıon after June				-		•				
10	Г													
11		An organization organized and operated exclusively to test for public safety. See <b>section 509(a)(4).</b> 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 <b>section 509(a)(3).</b> Check the box that describes the type of supporting organization and complete lines 11e through 11h <b>a</b> Type I <b>b</b> Type II <b>c</b> Type III - Functionally integrated <b>d</b> Type III - Other												
e f g	Γ	other the section If the ocheck the Since A	nan foundatı 1509(a)(2) rganızatıon :hıs box	ox, I certify that the on managers and oth received a written de 2006, has the organi	ner than one	or more pub	licly supporte	ed organızat Type I, Type	ions describe	d in section	509(a)(1) or			
				rectly or indirectly c	ontrols, eithe	eralone orto	gether with p	persons des	crıbed ın (ıı)		Yes No			
		and (III)	) below, the	governing body of th	e the suppor	ted organiza	tion?			<b>11g(</b> i	i)			
		(ii) a fa	mily membe	er of a person descril	bed ın (ı) abo	ve?				<b>11</b> g(i	i)			
		(iii) a 3	5% control	led entity of a persoi	n described i	n (ı) or (ıı) a	bove?			<b>11</b> g(ii	ii)			
h		Provide	the following	ng information about	the supporte	ed organızatı	on(s)				_			
	(i) Name suppoi rganiza	e of rted	(ii) EIN	lines 1 - 9 above   col (i) listed in   col (i) of your   col (i) organized   Amour							(vii) A mount of support			
		instructions)) Yes No Yes No												
Tota	ī													

# Part III 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.)

	under Fait III. II til	e organization i	ans to quanty u	iluei tile tests i	isted below, pie	ase co	ilipiete r	ait III.)
	ection A. Public Support	1	1					
Car	endar year (or fiscal year beginning in) ►	<b>(a)</b> 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	<b>(d)</b> 2009	<b>(e)</b> 2	010	<b>(f)</b> ⊤otal
1	Gifts, grants, contributions, and							
	membership fees received (Do not	12,385,840	2,659,176	3,806,003	2,786,653		1,589,434	23,227,106
	ınclude any "unusual	12,303,040	2,039,170	3,000,003	2,700,033	,	1,309,434	23,227,100
	grants ")							
2	Tax revenues levied for the							
	organization's benefit and either							
	paid to or expended on its							
_	behalf The value of services or facilities						<del></del>	
3	furnished by a governmental unit							
	to the organization without charge							
4	<b>Total.</b> Add lines 1 through 3	12,385,840	2,659,176	3,806,003	2,786,653		1,589,434	23,227,106
5	The portion of total contributions	12,303,010	2,033,170	3,000,003	2,700,033		1,303,131	23,227,100
Э	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							3,450,453
	on line 1 that exceeds 2% of the							
	amount shown on line 11, column							
	(f)							
6	Public Support. Subtract line 5							19,776,653
	from line 4							15,770,055
	ection B. Total Support							
Cal	endar year (or fiscal year	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	<b>(e)</b> 20	310	<b>(f)</b> Total
_	beginning in)							
7	Amounts from line 4	12,385,840	2,659,176	3,806,003	2,786,653	1	.,589,434	23,227,106
8	Gross income from interest,							
	dividends, payments received on	1,600,819	1,239,049	508,307	65,620		137,546	3,551,341
	securities loans, rents, royalties and income from similar	1,000,619	1,239,049	300,307	03,020		137,340	3,331,341
	sources							
9	Net income from unrelated							
9	business activities, whether or							
	not the business is regularly							
	carried on							
10	Other income Do not include							
	gain or loss from the sale of	145,967	170,371	110,921	40,175		153,340	620,774
	capital assets (Explain in Part	143,907	170,371	110,921	40,173		133,340	020,774
	IV)						$\longrightarrow$	
11	Total support (Add lines 7							27,399,221
	through 10)							
12	Gross receipts from related activiti	ies, etc. (See insti	ructions )			12		16,063,837
13	First Five Years If the Form 990 is	for the organization	on's first, second,	thırd, fourth, or fı	fth tax year as a	501(c)(	3) organız	·
	check this box and <b>stop here</b>							<b>►</b> □
_								
	ection C. Computation of Pul			4.4   (6)				
14	Public Support Percentage for 201	-		11 column (f))		14		72 180 %
15	Public Support Percentage for 200	9 Schedule A, Par	t II, line 14			15		60 630 %
16a	<b>33 1/3% support test—2010.</b> If the				ne 14 is 33 1/3%	or more	t, check t!	
	and <b>stop here.</b> The organization qua					2.2 4 /20/		<b>▶</b>  ✓
b	33 1/3% support test—2009. If the				a, and line 15 is .	33 1/3%	or more,	
17-	box and <b>stop here.</b> The organizatio				01216000166	s and lin	. 1 /	<b>►</b> □
1/a	10%-facts-and-circumstances test							
	is 10% or more, and if the organization med							·ed
	organization	ets the lacts and	Circuinstances	test The organiza	icion quannes as	a publici	y support	.eu ▶□
b	10%-facts-and-circumstances test	<b>—2009</b> . If the oraș	nization did not o	heck a box on lin	e 13.16a 16b o	r 17a ar	nd line	- 1
	15 is 10% or more, and if the organ							
	Explain in Part IV how the organiza							
	supported organization				5		,	<b>▶</b> ┌
18	Private Foundation If the organizat	ion did not check	a box on line 13,	16a, 16b, 17a or	17b, check this	box and	see	•
	instructions		•					<b>▶</b> □

organization

Part 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 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total in) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 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 Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f)) 17 **17** Investment income percentage from 2009 Schedule A, Part III, line 17 18 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

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 **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).

Schedule A (Form 990 or 990-EZ) 2010

# Software ID: Software Version:

**EIN:** 23-7079011

Name: WILLIAM & MARY BUSINESS SCHOOL FOUNDATION

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

Compensated Employees, and	Independ	dent C	ontr	act	ors	•				
(A) Name and Title	(B) Average hours per	(C) Position (check all that apply)				( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
A MARSHALL ACUFF JR BOARD MEMBER		х	'					0	0	0
DANIEL WASTON BOARD MEMBER		Х						0	0	0
JERRY A BRIDGES BOARD MEMBER		Х						0	0	0
JAMES W BRINKLEY CHAIRMAN		Х		х				0	0	0
LEONARD BROOKS III BOARD MEMBER		Х						0	0	0
K DANE BROOKSHER BOARD MEMBER		х						0	0	0
STEPHEN R BYERS BOARD MEMBER		Х						0	0	0
J EDWARD COLEMAN BOARD MEMBER		Х						0	0	0
ALEXANDER E DEAN BOARD MEMBER		Х						0	0	0
KATHLEEN DURDIN CPA BOARD MEMBER (EX-OFFICIO)		Х						0	0	0
FRANCES C ENGORON BOARD MEMBER		Х						0	0	0
ROB W ESTES JR BOARD MEMBER		Х						0	0	0
MICHAEL H FITZGERALD BOARD MEMBER		Х						0	0	0
THOMAS R FRANTZ ESQUIRE BOARD MEMBER		Х						0	0	0
KENNETH A HIMMEL BOARD MEMBER		Х						0	0	0
VERNON L IRVIN BOARD MEMBER		Х						0	0	0
TROY D KEEN BOARD MEMBER		Х						0	0	0
KATHI P LENTZSCH BOARD MEMBER		Х						0	0	0
DONALD LOWMAN BOARD MEMBER		Х						0	0	0
WILLIAM P LYONS BOARD MEMBER		Х						0	0	0
RAYMOND A MASON VICE CHAIRMAN		Х		Х				0	0	0
J ROBERT MOONEY VICE CHAIR BOARD OPERATIONS		Х		Х				0	0	0
DONALD N PATTEN ESQUIRE BOARD MEMBER		Х						0	0	0
A CLAYTON PERFALL BOARD MEMBER GARY M PFEIFFER		Х						0	0	0
BOARD MEMBER		Х						0	0	0

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

Compensated Employees, and	Independ	dent C	ont	ract	tors	•				
(A) Name and Title	(B) Average hours		tion that a		/)			(D) Reportable compensation	(E) Reportable compensation	<b>(F)</b> Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
C LARRY POPE BOARD MEMBER		×						0	0	0
ROGER S PRATT BOARD MEMBER		Х						0	0	0
LAWRENCE B PULLEY VICE CHAIR BOARD OPERATIONS		Х		х				0	0	0
TAYLOR REVELEY PRESIDENT, COLLEGE OF (EX		Х						0	0	0
RICK RIKKOLA DIRECTOR (EX-OFFICIO)		Х						0	0	0
JEFF ROGATZ BOARD MEMBER		Х						0	0	0
PAUL C SAVILLE BOARD MEMBER		Х						0	0	0
BARRY J SHARP BOARD MEMBER		Х						0	0	0
THADDEUS R SHELLY III TREASURER		Х		Х				0	0	0
MARK R SHENKMAN BOARD MEMBER		Х						0	0	0
JOYCE L SHIELDS BOARD MEMBER		х						0	0	0
K DANE SNOWDEN BOARD MEMBER		Х						0	0	0
NICHOLAS J ST GEORGE BOARD MEMBER		Х						0	0	0
MIKE STAKIAS BOARD MEMBER		Х						0	0	0
EDWARD T TOKAR BOARD MEMBER		Х						0	0	0
JAMES E UKROP BOARD MEMBER		Х						0	0	0
PATRICK J WALSH BOARD MEMBER		Х						0	0	0
H THOMAS WATKINS III BOARD MEMBER		Х						0	0	0
WILLIAM E WESTBROOK JR BOARD MEMBER		х						0	0	0
CARLA KING-JOHNSON ASSISTANT TREASURER	40 00			х				50,838	0	15,904

DLN: 93493135007472

OMB No 1545-0047

Open to Public Inspection

## **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.

Name of the organization **Employer identification number** WILLIAM & MARY BUSINESS SCHOOL FOUNDATION

Part I	Organizations Maintaining Donor Acorganization answered "Yes" to Form 99			or Accounts. Complete if the
		(a) Donor advised funds	(	(b) Funds and other accounts
Total	number at end of year			
A ggre	gate contributions to (during year)			
A ggre	gate grants from (during year)			
A ggre	gate value at end of year			
	ne organization inform all donors and donor advi are the organization's property, subject to the	_	nor advı	rsed <b>Yes No</b>
used	ne organization inform all grantees, donors, and only for charitable purposes and not for the ben erring impermissible private benefit			
art II	Conservation Easements. Complete	ıf the organization answered "Yes"	to Forn	n 990, Part IV, line 7.
□ P □ P □ Comp	ose(s) of conservation easements held by the or Preservation of land for public use (e g , recreati Protection of natural habitat Preservation of open space Dete lines 2a-2d if the organization held a quali	on or pleasure) Preservation of a Preservation of a	certifie	d historic structure
easer	ment on the last day of the tax year			
				Held at the End of the Year
	number of conservation easements		2a	
Total	acreage restricted by conservation easements		2b	
	per of conservation easements on a certified his	* *	2c	
Numb	per of conservation easements included in (c) a	cquired after 8/17/06	2d	
	oer of conservation easements modified, transfe axable year 🗕	erred, released, extinguished, or terminat	ed by th	ne organization during
Numb	per of states where property subject to conserva	ation easement is located 🗠		
	the organization have a written policy regarding cement of the conservation easements it holds?		ndling of	violations, and Yes No
Staff	and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easer	ments d	uring the year ►
Amou	unt of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easement	ts durin	g the year ► \$
	each conservation easement reported on line 2 h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of se	ction	┌ Yes ┌ No
balan	rt XIV, describe how the organization reports co ice sheet, and include, if applicable, the text of t rganization's accounting for conservation easen	the footnote to the organization's financia		
art III	Organizations Maintaining Collectio Complete of the organization answered		or Ot	her Similar Assets.
art, hı	organization elected, as permitted under SFAS istorical treasures, or other similar assets held de, in Part XIV, the text of the footnote to its fin	for public exhibition, education or resear	rch ın fu	
hıstor	organization elected, as permitted under SFAS rical treasures, or other similar assets held for l de the following amounts relating to these items	public exhibition, education, or research		
(i) <sub>Re</sub>	evenues included in Form 990, Part VIII, line 1			<b>▶</b> \$
(ii) A	ssets included in Form 990, Part X			<b>▶</b> \$
Ifthe	organization received or held works of art, history orgamounts required to be reported under SFA		for finan	
Rever	nues included in Form 990, Part VIII, line 1			<b>►</b> \$
b Asset	ts included in Form 990, Part X			<b>►</b> \$

a R b C c C 4 P F	Jsing the organization's accession and other tems (check all that apply)  Public exhibition  Scholarly research  Preservation for future generations	r records, check any	of th	e foll	_		_	ant u	se of its o	ollection	1	
<b>b</b> Γ <b>c</b> Γ <b>4</b> F <b>7</b>	Scholarly research		d									
с Г 4 Р 5 С				,	Loan or	rexcha	ange prog	rams				
4 P	Preservation for future generations		e	Γ	Other							
5 C	-											
	Provide a description of the organization's co Part XIV	llections and explai	ın hov	v the	y further	the or	ganızatıo	n's ex	empt pur	pose in		
а	During the year, did the organization solicit on section solicitions sets to be sold to raise funds rather than t								nılar	Г	Yes	√ No
Part		<b>ements.</b> Comple	ete ıf	the	organız	atıon			es" to Fo	rm 990	),	
	s the organization an agent, trustee, custod ncluded on Form 990, Part X?	ıan or other ınterme	diary	for c	ontrıbutı	ons or	other as	setsı	not	Γ	Yes	┌ No
<b>b</b> I	f "Yes," explain the arrangement in Part XI\	/ and complete the i	follow	ıng ta	able							
										Amou	nt	
c [	Beginning balance							<b>1</b> c				
d,	Additions during the year							1d				
<b>e</b> [	Distributions during the year							1e				
f [	Ending balance							1f				
<b>2a</b> [	Old the organization include an amount on Fo	orm 990, Part X, line	e 21?							Γ	Yes	┌ No
<b>b</b> I	f "Yes," explain the arrangement in Part XIV	·										
Part	V Endowment Funds. Complete											
	7	(a)Current Year	(b	Prior		(c)Tw	o Years Bad 39,018,	<u> </u>	Three Yea	rs Back <b>(e</b>	)Four Y	ears Back
	Beginning of year balance	34,527,827		<i>-</i> 34	1,058,025			765				
	Contributions	32,258 2,393,792		7	250,862 2,197,841		-2,634,					
	Investment earnings or losses	2,393,792			.,171,041		-2,034,	U4 /				
	Grants or scholarships	1,521,111		1	1,978,901		2,417,	249				
	Other expenditures for facilities and programs	1, 321,111		1	., 57 0, 50 1		2,417,.	£77				
f /	Administrative expenses											
g E	End of year balance	35,432,766		34	,527,827		34,058,	025				
<b>2</b> P	rovide the estimated percentage of the yea	r end balance held a	is					·				
	Board designated or quasi-endowment											
	Permanent endowment • 100 000 %											
	Ferm endowment											
	lerm endowment <b>F</b> Are there endowment funds not in the posses	ssion of the organiza	ation 1	hat a	are held a	and ad	mınıstere	d for	the			
	organization by										Yes	No
(	i) unrelated organizations			•						3a(i)		No
	(ii) related organizations									3a(ii)		No
	f "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of th	•						•		3b		
	VI Investments—Land, Buildings					Λ Dar	t V lino	10				
ir eil U		s, and Equipmen	<u>3</u>						(5) 100	mulated		
	Description of investment				a) Cost or sis (invest		(b)Cost of basis (of		(c) Accu depred		(d) Bo	ok value
	and		•									
	uldings		•									
<b>c</b> Le	easehold improvements		•									
	quipment		•				Ġ	95,278		75,479		19,799
	ther			<u> </u>								
Total.	Add lines 1a-1e <i>(Column (d) should equal Fo</i>	rm 990, Part X, colun	nn (B)	, line	10(c).)			•	•	dule D (F		19,799

Part VII Investments—Other Securities. See F	orm 990, Part X, line 1	2.	
<ul><li>(a) Description of security or category (including name of security)</li></ul>	(b)Book value		od of valuation f-year market value
(1)Financial derivatives		Cost of end o	year market value
(2)Closely-held equity interests			
(3)Other			
(A) WILLIAM AND MARY INVESTMENT TRUST - SCHOOL OF BUSINESS POOL	17,522,926		F
	, ,		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12 )	17,522,926		
Part VIII Investments—Program Related. See	Form 990, Part X, line		
(a) Description of investment type	(b) Book value		od of valuation f-year market value
		Cost of elia-o	i-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )			
Part IX Other Assets. See Form 990, Part X, lin	e 15.	_	
(a) Descrip	tion		(b) Book value
Tabal (Caluman (b) about desiral Farms 2000, Bart V, and (B) line 11	- \		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X		<del>.</del>	
1 (a) Description of Liability	( <b>b</b> ) Amount		
Federal Income Taxes	(D) / ////odire		
redeful Theorie Taxes			
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 )			

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,181,074
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,777,538
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-596,464
4	Net unrealized gains (losses) on investments	4	2,117,329
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV )	8	-9,642
9	Total adjustments (net) Add lines 4 - 8	9	2,107,687
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,511,223
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	8,288,761
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	2,107,687
3	Subtract line <b>2e</b> from line <b>1</b>	3	6,181,074
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines <b>4a</b> and <b>4b</b>	<b>4</b> c	0
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	6,181,074
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	6,777,538
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines <b>2a</b> through <b>2d</b>	2e	0
3	Subtract line <b>2e</b> from line <b>1</b>	3	6,777,538
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines <b>4a</b> and <b>4b</b>	<b>4</b> c	0
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	6,777,538
Pai	t XIV Supplemental Information		

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

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

Identifier	Return Reference	Explanation
	PART III, LINE 1A	COLLECTION ITEMS ACQUIRED THROUGH PURCHASE OR DONATION ARE NOT RECOGNIZED AS ASSETS ON THE STATEMENT OF FINANCIAL POSITION PURCHASES OF COLLECTION ITEMS ARE RECORDED AS DECREASES IN UNRESTRICTED NET ASSETS IF PURCHASED WITH UNRESTRICTED ASSETS AND AS DECREASES IN TEMPORARILY RESTRICTED NET ASSETS IF PURCHASED WITH DONOR-RESTRICTED ASSETS CONTRIBUTIONS OF COLLECTION ITEMS ARE NOT RECOGNIZED IN THE STATEMENT OF ACTIVITIES THE COLLECTIONS CURRENTLY CONSIST OF WORKS OF ART AND ARE DISPLAYED ON SITE
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	TO SUPPORT A PUBLIC INSTITUTION OF HIGHER EDUCATION, THE COLLEGE OF WILLIAM AND MARY MASON SCHOOL OF BUSINESS, IN ACCORDANCE WITH THE INTENT OF THE DONORS
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE FOUNDATION IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND THE TAX STATUTES OF THE COMMONWEALTH OF VIRGINIA HOWEVER, INCOME FROM CERTAIN INVESTMENTS IS SUBJECT TO TAXATION AS UNRELATED BUSINESS INCOME NO TAXES WERE DUE OR PAID DURING 2011 THE FOUNDATION HAS DETERMINED THAT IT DOES NOT HAVE ANY MATERIAL UNRECOGNIZED TAX BENEFITS OR OBLIGATIONS AS OF JUNE 30, 2011 ACCORDINGLY, THE ACCOMPANYING FINANCIAL STATEMENTS DO NOT REFLECT A PROVISION OR LIABILITY FOR FEDERAL AND STATE INCOME TAXES FISCAL YEARS ENDING ON OR AFTER JUNE 30, 2008 REMAIN SUBJECT TO EXAMINATION BY FEDERAL AND STATE TAX AUTHORITIES
		PART XI, LINE 8- CHANGE IN VALUE OF TRUST AGREEMENT

DLN: 93493135007472

OMB No 1545-0047

2010

Open to Public **Inspection** 

#### SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

to Part I

c Totals (add lines 3a and 3b)

Statement of Activities Outside the United States

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

**Employer identification number** Name of the organization WILLIAM & MARY BUSINESS SCHOOL FOUNDATION 23-7079011 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States Activites per Region (Use Part V if additional space is needed ) (f) Total (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is offices in the employees or region (by type) (e g, a program service, describe expenditures for region agents in region or fundraising, program services, specific type of region/investments independent investments, grants to service(s) in region in region contractors recipients located in the region) CENTRAL AMERICA AND THE 0 0 INVESTMENTS 4,390,314 CARIBBEAN EAST ASIA & THE PACIFIC 0 0 INVESTMENTS 340,411 EUROPE 0 0 INVESTMENTS 587,740 NORTH AMERICA 0 0 INVESTMENTS 21,600 SOUTH AMERICA 0 INVESTMENTS 65,140 0 SOUTH ASIA 0 0 INVESTMENTS 12,156 SUB-SAHARAN AFRICA 0 0 INVESTMENTS 21,177 5,438,538 0 3a Sub-total **b** Total from continuation sheets 0

0

5,438,538

Part	Part IV, l	ine 15, for any					plete if the organiza received more thai		
	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	<b>(f)</b> Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nur tax-exempt by	mber of recipie the IRS, or fo	nt organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►	
3	Enter total nur	mber of other o	organizations or en	tities					(Form 990) 2010

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.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	( <b>d)</b> A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
			I				
			1				
			i				
			1				
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### Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? <i>If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)</i>	<u> </u>	Yes	Г	Νo
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)	Γ	Yes	굣	Νo
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)	Г	Yes	ᅜ	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)	Г	Yes	굣	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)	Г	Yes	굣	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).	Г	Yes	<u>ত</u>	Νo

Schedule F (Form 990) 2010

#### **Additional Data**

Software ID: Software Version:

**EIN:** 23-7079011

Name: WILLIAM & MARY BUSINESS SCHOOL FOUNDATION

Schedule F (Form 990) 2010

Page **5** 

#### Part V Supplemental Information

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

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Schedule I (Form 990)

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

OMB No 1545-0047

2010

DLN: 93493135007472

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

Attach to Form 990

Inspection

Employer identification number

WILLIAM & MARY BUSINESS S	CHOOL FOUNDATI	ON				23-7079011	
Part I General Inform	nation on Grants	and Assistance				I	
<ul><li>Does the organization main the selection criteria used</li><li>Describe in Part IV the organization</li></ul>	to award the grants	orassistance?					<b>∀</b> Yes <b>⊢</b>
Form 990, Part I	V, line 21 for any	Governments and recipient that received eded	d more than \$5,000	. Check this box if no	o one recipient rec	ceived more than \$5,	
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) COLLEGE OF WILLIAM AND MARYPO BOX 8795 WILLIAMSBURG, VA 231878795	54-6001718		1,406,750				EXECUTIVE MBA PROGRAM STUDENTS TUITION
(2) COLLEGE OF WILLIAM AND MARYPO BOX 8795 WILLIAMSBURG, VA 231878795	54-6001718		42,600				BOARD OF VISITORS SUPPORT
(3) COLLEGE OF WILLIAM AND MARYPO BOX 8795 WILLIAMSBURG, VA 231878795	54-6001718		15,399				PARKING DECALS AND RESERVED PARKING SPACES
(4) COLLEGE OF WILLIAM AND MARYPO BOX 8795 WILLIAMSBURG, VA 231878795	54-6001718		960,408				ALAN B MILLER HALL CONSTRUCTION, FURNISHING AND DEBT SERVICE
(5) COLLEGE OF WILLIAM AND MARYPO BOX 8795 WILLIAMSBURG, VA 231878795	54-6001718		1,430				EQUIPMENT
(6) COLLEGE OF WILLIAM AND MARYPO BOX 8795 WILLIAMSBURG, VA 231878795	54-6001718		21,842				STUDENT SCHOLARSHIPS
(7) COLLEGE OF WILLIAM AND MARYPO BOX 8795 WILLIAMSBURG, VA 231878795	54-6001718		1,821				SUPPORT MBA ASSOCIATION PROJECTS
2 Enter total number of sect	non 501(c)(3) and go	overnment organizations					▶ 1

Enter total number of other organizations . . .

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Pa	art 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)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

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
PROCEDURE FOR MONITORING GRANTS IN THE U S	, , , , , , , , , , , , , , , , , , ,	SCHEDULE I, PART I, LINE 2 THE USE AND AMOUNTS OF THE GRANTS AND SCHOLARSHIPS ARE DETERMINED BY THE FUND DONOR AND THE ENDOWMENT INCOME BUDGET WHEN APPLICABLE THE COLLEGE ADMINISTERS THE SCHOLARSHIPS AND MAKES THE SELECTIONS ACCORDING TO THE DONOR'S CRITERIA THE FOUNDATION THEN REIMBURSES THE COLLEGE THE COLLEGE IS AUDITED BY THE COMMONWEALTH OF VIRGINIA'S AUDITOR OF PUBLIC ACCOUNTS

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DLN: 93493135007472

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service

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

**NonCash Contributions** 

Name of the organization WILLIAM & MARY BUSINESS SCHOOL FOUNDATION

**Employer identification number** 

		•			23-7079011			
Pa	rt I Types of Property			•				
		(a) Check if applicable	<b>(b)</b> Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d) Method of determining of amounts		ontribut	ion
1	Art—Works of art	Х	1	0				
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
	Clothing and household							
good								
	Cars and other vehicles .							
7	Boats and planes							
	Intellectual property		1.0	1 502 006	EATD VALUE			
	Securities—Publicly traded Securities—Closely held stock	X	16	1,502,886	FAIR VALUE			
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							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts .							
	O ther ▶ ()							
	Other ►()							
	Other ▶()							
28 29	Other ► () Number of Forms 8283 received by	the ora	anization during the tay yes	r for contributions				
29	for which the organization complete				29			
			,	,			Yes	No No
30a	During the year, did the organization	n receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it			
	must hold for at least three years f	rom the o	date of the initial contribution	on, and which is not require	d to be used			
	for exempt purposes for the entire	holding p	eriod?			30a		No
ь	If "Yes," describe the arrangement	: in Part 1	I					
31	Does the organization have a gift a			eview of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or use t contributions?		es or related organizations	to solicit, process, or sell	non-cash	32a		Νo
h	If "Yes," describe in Part II							110
33	If the organization did not report re	venuesi	n column (c) for a type of n	roperty for which column (a	) is checked.			
	describe in Part II		committee for a cype of p	apore, for milen column (a	, is checked,			

#### 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
NON REPORTING OF REVENUE	,	THE ORGANIZATION DID NOT RECORD REVENUE FOR THE CONTRIBUTION OF ART, IN ACCORDANCE WITH ITS ACCOUNTING POLICY DESCRIBED IN SCHEDULE D, PART XIV

Schedule M (Form 990) 2010

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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.

Name of the organization WILLIAM & MARY BUSINESS SCHOOL FOUNDATION

Employer identification number 23-7079011

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE FIRST REVIEW OF THE 990 IS BY THE CONTROLLER THE SECOND REVIEW IS BY THE FOUNDATION'S DIRECTOR OF OPERATIONS WHO ALSO SIGNS THE 990

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	EMPLOYEES AND OFFICERS PAID BY THE COLLEGE OF WILLIAM AND MARY ARE REQUIRED TO COMPLETE THE VIRGINIA STATEMENT OF ECONOMIC INTEREST EACH YEAR

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE OFFICERS AND EMPLOYEES OF THE ORGANIZATION ARE PAID VIA THE COLLEGE OF WILLIAM & MARY/STATE OF VIRGINIA THE FOUNDATION ADHERES TO THE COMPENSATION PRACTICES OF THE STATE OF VIRGINIA AND IT REIMBURSES THE COLLEGE/STATE FOR ITS PAYROLL THE PROCESS WAS LAST UNDERTAKEN FOR EACH PERSON IN 2011 THE ONLY OFFICER COMPENSATED FOR THEIR SERVICES TO THE ORGANIZATION WAS THE NON-VOTING ASSISTANT TREASURER

Identifier	Return Reference	Explanation
		COPIES ARE PROVIDED UPON REQUEST AND FOR INSPECTION AT THE OFFICE OF THE ORGANIZATION

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR	FORM 990, PART	NET UNREALIZED GAINS ON INVESTMENTS 2,117,329 CHANGE IN VALUE OF TRUST
FUND BALANCES	XI, LINE 5	AGREEMENT -9,642 TOTAL TO FORM 990, PART XI, LINE 5 2,107,687

ldentifier	Return Reference	Explanation
BOARD SELECTION OF AUDITOR	FORM 990, PART XII, LINE 2C	THE BOARD ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT AND THE SELECTION OF THE INDEPENDENT ACCOUNTANT, THIS PROCESS HAS NOT CHANGED SINCE THE PRIOR YEAR

ldentifier	Return Reference	Explanation
SIGNATURE AUTHORITY OVER A FOREIGN ACCOUNT	FORM 990, PART V, LINE 4B	THE ORGANIZATION IS BENEFICIARY OF A GRANTOR TRUST THAT HAS INVESTED IN HEDGE FUNDS FOR WHICH FORM TD F 90-22 1 HAS BEEN FILED